1-888-877-1655

shipping you'd tack on). Granted, a manufacturer toner cartridge for my old black and white laser jets isn't cheap, either I'll be doing MOSTLY black and white printing, so the colors won't go down as fast, but still Given this printer sells for $300, spending over 1/3 of that price on a single complete ink refill is a LOT

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HP LaserJet P2055 Printer series

1 150-sheet output bin
2 Adjustable 50-sheet
multipurpose input tray 1
for specialty paper
3 250-sheet input tray 2
4 500-sheet input tray 3 for
a maximum input capacity
of up to 800 sheets
5 Rear output door provides
a straight-through path for
special papers
6 Intuitive control panel for
simple and effective
interaction
7 Automatic two-sided
printing capability
8 Hi-Speed USB 2.0 port for
direct connect printing
9 HP Jetdirect Gigabit
Ethernet print server for
flexible networking
10 128 MB of memory and a
500 MHz processor
perform complex tasks
quickly

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Fax Cover Sheet

To: Test Faxaholic

Fax Number: +1555555555

Company:

From: Your Fiendish Goody

Re: that thing that you do with 'OPAL

Today's Date: Sat Apr 14 2018, 18:11 PDT

# of pages to follow this sheet:

Comments: If you can read this, you are faxing too close

hello
World

Hello

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
DM Services LLC

Business name, if different from above

Check appropriate box: ☐ Individual/sole proprietor ☐ Corporation ☐ Partnership
☑ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ C
☐ Other (see instructions) ▶

☐ Exempt payee

Address (number, street, and apt. or suite no.)
108 N. Cohshan Dr

Requester's name and address (optional)

City, state, and ZIP code
Hazleton, PA. 18201

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
___ ___ ____
or

Employer identification number
20 1 1282785

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of U.S. person ▶ Kelly Monahan Date ▶ 4-3-12

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

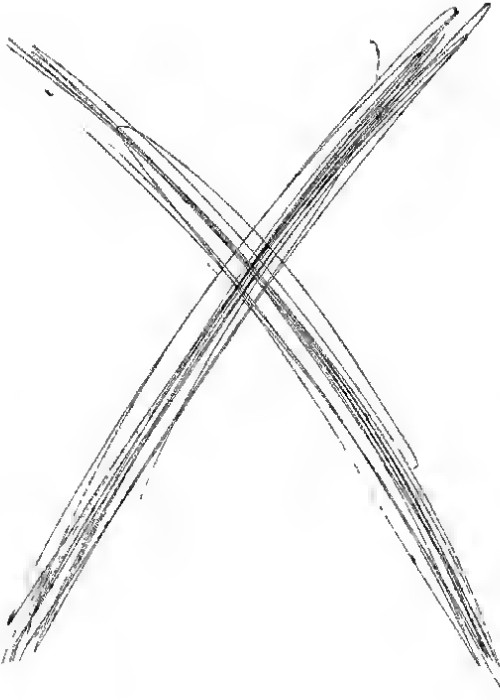
Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

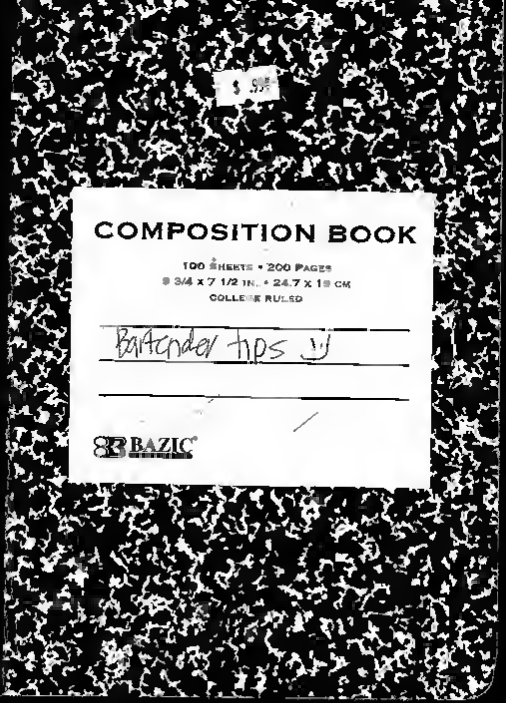
- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity

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Name _____ Date _____

SELECTION TEST A, POINT OF VIEW

Vocabulary

Choose the answer that best explains the meaning of each underlined word. (5 points each)

8. Frederick's quick wit
   A. ability to solve problems
   B. explanation of how he solved it
   C. ability to think of clever replies
   D. ability to see the humor in a situation

9. What is meant by the following?
   A. a way to teach a difficult skill more than once
   B. the ability to be successful at all times
   C. the desire to be the best in every area
   D. a belief in one's own ability

10. An ardent person is
    A. devoted
    B. helpful
    C. tactful
    D. brave

Written Response

Short Response Answer the following questions based on your knowledge of the biography. Write your answers on a separate sheet of paper. (10 points each)

11. What is one of Frederick Douglass's most important accomplishments?

12. What two details show that the author's life was less than perfect in many ways?

Extended Response Answer the following question based on your knowledge of the biography. Write an essay of two paragraphs on a separate sheet of paper. (20 points)

13. Explain how compromise and courage were necessary challenges for the journey to be "North Star." Use specific examples from the story to support your answer.

Adamsville Family Medicine
Mark Richman, MD
3015 Veterans Memorial Drive, #104
Adamsville AL United States 35005
Business 205-674-1222
DEA # BR4152883 / XR152883 LIC # AL18489

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Mark Richman, MD

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Phone	Phone
Subject: Test Fax	Date:

Fax Settings

Reference your Owner's Manual for help adjusting the settings below:

ECM (error correction mode)	Off
Baud Rate	9600
International	On (this is set on a per-call basis)
Resolution	Standard
Answer Mode	Fax Only
Rings to Answer	Zero (0)
Call Waiting	Off
Bandwidth Saver	High (90 kbps)
Distinctive Ring	Off

Troubleshooting Steps

The steps below will help you resolve common faxing problems.

- Switch off fax machine and unplug power adapter from device and from wall outlet
  - Let fax machine remain off for 60 seconds.
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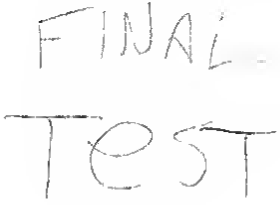
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device, bypassing any home wiring.
- If using an All-In-One device temporarily disconnect device from PC.

Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help.

Call us at 1 VONAGE HELP (1.866-243-4357) or visit **www.vonage.com**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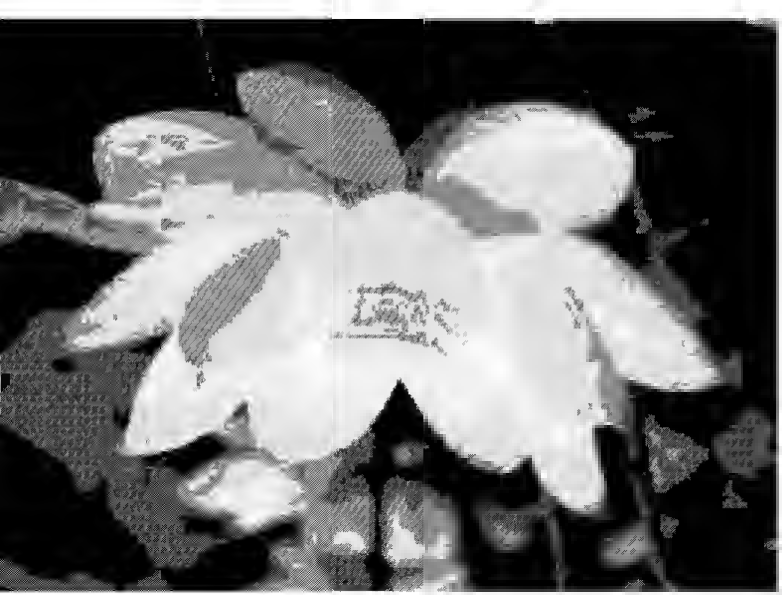

Burgers are made with 100% all natural, with no hormones or antibiotics. We grind blend of Black Angus Beef daily to provide you the highest quality of freshness and flavor. Burgers are cooked to medium unless other requested

Specialty Burgers

M Burger

Provolone Cheese, Lettuce, Fried Egg, Pico de Gallo and Sliced Bacon

5.50

Veggie Burger

Fresh herb mix Seared with Mayo, Ketchup, Lettuce, Tomato and Melted Provolone Cheese

5.50

The Sunrise Burger

Bacon, Sunny Side Egg, American Cheese and Shack Sauce

5.95

Cross-Fit Burger

Two Grilled Patties, Lettuce, Tomato, Avocado, Grilled Mushrooms, Pepper, Onions, Fried Egg and Pico de Gallo

6.55

Insanity Burger

Grilled Beef Patties Bacon, Fried Egg, Cheese, Lettuce with Lettuce, Tomato, Pickle and Shack Sauce

7.55

The Mechanic

Our 6oz burger topped with Fried Egg and Caramelized Onions

8.35

Made to order. Substitute Ezekiel for $1.00 extra

Create Your Own

All burgers 4.3oz Patties

Single Patty 4.50

Double Patty 5.95

Free Toppings

Lettuce, Pickle, Tomato, Onion, Mustard, Spicy Mustard, Hot Sauce, Pepper, Mayo, Sauce, Mayonnaise

Additional Toppings

Tomato .50, Avocado .75, Fried Egg .75, Extra Onions 1.50, Smoked Bacon 1.00, Lettuce + Pickles 1.00, Shack Sauce .50, Tomato, Chili .75, Provolone Cheese .50, American Cheese .50, Pepper & Onions .50

Sandwiches Salads & Dogs

Homemade Italian Sausage

Sautéed Mushrooms, Onions and Peppers topped with Provolone Cheese 5.50

Fish Sandwich

Blackened mahi Mahi, lettuce, tomato Dijon Tartar Sauce, Pickle and Shack Sauce 7.25

Grilled Cheese 4.25

Add Bacon 1.50, Add Apple Wood Smoked Bacon 1.00

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Hot Diggity Dog

Famous New Castle Chili and Cheddar Cheese 4.25

Chicago Dog

Relish, Onion, Pickle, Celery Salt & Mustard 4.25

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3.50

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THE PRODIGAL SON
(LUKE 15:11-32)

MEMORY VERSE

"... for this my son was dead and is alive again, he was lost and is found ..." LUKE 15:24

A certain man had two sons.

TRUE OR FALSE

1 "And the younger of them said to his father 'Father, give me the portion of goods that falls to me.' So he divided to them his livelihood." **LUKE 15:12**

TRUE OR FALSE

2. "...the younger son gathered all together, journeyed to a far country, and there wasted his possessions with prodigal living." **LUKE 15:13**

TRUE OR FALSE

FILL IN THE BLANKS.

3 "But when he had spent _____, there arose a severe famine in that land, and he began to be in want." **LUKE 15:14**

4 "Then he went and joined himself to a citizen of that country, and he sent him into his fields to feed _____." **LUKE 15:15**

TRUE OR FALSE

5 "...no one gave him anything." **LUKE 15:16**

TRUE OR FALSE

FILL IN THE BLANKS

6 "I will arise and go to my father, and will say to him 'Father, I have sinned against heaven and before you, and I am no longer worthy to be called your _____. Make me like one of your hired servants.'" **LUKE 15:18-19**

7 "And he arose and came to his father. But when he was still a great way off, his father saw him and had compassion, and _____, and fell on his neck and kissed him." **LUKE 15:20**

8 "But the father said to his servants, 'Bring out the best robe, and put it on him, and put a ring on his hand and sandals on his feet. And bring the fatted calf here and kill it, and let us eat and be merry; for this my son was _____, and is _____, again; he was lost, and is found.'..." **LUKE 15:22-24**

TRUE OR FALSE

9 "Now his older son was in the field. And as he came and drew near to the house, he heard music and dancing. So he called one of the servants and asked what these things meant." **LUKE 15:25-26**

TRUE OR FALSE

10 And he was excited and went in. **LUKE 15:28**

TRUE OR FALSE

FILL IN THE BLANKS:

11 "And he said to him 'Son, you are always with me, and all that I have is yours. It was right that we should make merry and be glad, for your brother was dead and is alive again; and was _____, and is _____.'" **LUKE 15:31-32**

HANSEN'S GOT TALENT 2013

AUDITIONS

APRIL 4

CHOIR ROOM

PRODUCCION DEL DIA

FECHA: Noviembre 9, 2017

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A Public Service Agency

VEHICLE/VESSEL TRANSFER AND REASSIGNMENT FORM INSTRUCTIONS

THIS FORM IS NOT THE OWNERSHIP CERTIFICATE. IT MUST ACCOMPANY THE TITLE OR APPLICATION FOR A DUPLICATE TITLE. PHOTOCOPIES OF THIS FORM MAY BE RETAINED FOR YOUR RECORDS.

Know your rights before you sign. Read the *Car Buyer's Bill of Rights* (FFVR 35) and *What you Need to Know Before Buying a* [illegible]

SECTION 1 — VEHICLE/VESSEL IDENTIFICATION

This section must be completed.

SECTION 2 — BILL OF SALE

To be completed by the seller of the vehicle/vessel identifying the buyer and/or gift recipient, the purchase price or gift value, and date of sale and/or gift.

SECTION 3 — ODOMETER DISCLOSURE STATEMENT

To be completed by the seller disclosing the mileage at the time of sale. Any alteration to the mileage [illegible] [illegible] retained for personal record. Dealers and Auto Auctions [illegible]

Federal law requires the hand printed name, date and signature of the buyer and seller when disclosing and acknowledging the odometer reading.

SECTION 4 — BUYER/SELLER INFORMATION *(Individual(s), Company, Dealership, [illegible])*

To be completed by the buyer to provide name and address, accept the responsibility of ownership, and/or acknowledge mileage [illegible]

NOTE: Co-owners joined by **"AND"** (shown by "/" on DMV records) require the signature of **EACH** owner. Co-owners joined by "OR" [illegible] of the company/business and an authorized representative's countersignature on the signature line (e.g. *ABC CO. by JOHN SMITH* or *JOHN SMITH for ABC CO.*)

To be completed when appointing a person or company to act as attorney-in-fact, to sign papers and documents that may be necessary in order to secure [illegible] interest in the identified vehicle or vessel. The [illegible]

INSTRUCCIONES PARA COMPLETAR ESTE FORMULARIO

ESTE FORMULARIO NO ES EL CERTIFICADO DE PROPIEDAD. ÉSTE DEBERÁ ACOMPAÑAR AL TÍTULO O LA SOLICITUD PARA DUPLICADO DE TÍTULO. PUEDE GUARDAR FOTOCOPIAS DE ESTE FORMULARIO PARA SU ARCHIVO PERSONAL.

[illegible] *Necesita Saber Antes de Comprar un Vehículo"* (FFVR 36) y otros folletos disponibles en ***www.dmv.ca.gov***

SECCIÓN 1 — IDENTIFICACIÓN DE VEHÍCULO/BARCO

[illegible]

Para completarse por el vendedor del vehículo/barco, para identificar al comprador y/o receptor del regalo, el precio de compra o valor del regalo y la fecha de la venta y/o regalo.

Para completarse por el vendedor declarando el millaje al momento de la venta. Cualquier alteración [illegible] de este documento y será obligatorio presentar una nueva declaración (incluyendo la firma de ambas partes). [illegible] declaración del odómetro por cinco (5) años.

La ley federal exige que el nombre sea escrito a mano así como la fecha y la firma del vendedor y del comprador cuando se [illegible] del odómetro.

SECCIÓN 4 — INFORMACIÓN SOBRE EL COMPRADOR/VENDEDOR *(Individuo[s] Compañía, Concesionario, Arrendatario/Arrendador o Fideicomiso)*

[illegible] UN propietario. [illegible] la firma (ejemplo: *ABC CO.* por *JOHN SMITH* o bien *JOHN SMITH* por *ABC CO.*)

[illegible] vehículo o barco identificado.

[illegible]

The Salvation Army Western Territory

Address
Tel
Fax

Fax Transmission

From John Griffith	*To.* 18888771655
Date Sent 05/02/2012 08 33 13 AM *Pages* 2	*FAX Number* 18888771655

Subject

Send a one page black and white test fax to **1-888-hpfaxtest** (1-888-473-2963)

510-445-0900-FaxTest

FaxZoy.net 1 858 877 1655 or 1 508 209 4208

1AXzero.com allows to send faxes to a FAX machine

Send/Receive Test (HP Fax Test Service)

- Load the paper into the fax machine following the manufacturer's instructions.
- Dial **"1-888-473-2963** on the fax machine and press **"Send"** or **Start "** depending on your fax machine
- Wait for the fax to finish transmitting. You will receive a return fax from HP within five to seven minutes of completion. If the fax is received then your machine is setup properly. If you do not receive the fax, then there is a problem with its configuration.

Receive Test (Interpage Free Fax Demo)

- Navigate to Interpage Free Fax Demonstration website
- Enter your fax number with no additional characters in the field labeled "Phone Number "
- Enter any character in the field labeled "Alpha/Numeric Character " which will be displayed on the cover page to differentiate fax attempts. Enter a different character each time you test your fax machine
- Enter a message into the field labeled "Message " Please note, this message will not be transmitted with the fax although the field cannot be left blank.
- Click "Send Fax" to send your test fax. The fax will be sent within a few moments of submitting.

Jesus is born.
Luke 2.1-7

TEST

Test

CITI THANKYOU® REWARDS
CITI THANKYOU® CARD TERMS AND CONDITIONS

Citi ThankYou Rewards is offered to certain cardmembers ("you") at the sole discretion of Citibank, N.A. ("we"), the issuer of your card account ("Card Account"). ThankYou® Rewards or any portion thereof may be revised or terminated with 30 days prior written notice. Any revisions may affect your ability to use the ThankYou Points you have properly accumulated. If ThankYou Rewards is terminated, you will only have 90 days from ThankYou Rewards termination date to redeem all your accumulated ThankYou Points ("ThankYou Points"). Rewards offered by ThankYou Rewards and the ThankYou Point levels required for specific rewards are subject to change without notice.

Unless you are participating in a limited-time offer, you will earn one ThankYou Point for every dollar you spend on purchases. Only purchases are eligible to earn ThankYou Points. Your ThankYou Points will not expire unless we terminate ThankYou Rewards.

At the end of each Citi ThankYou Card account membership year (your membership year begins the date you become a Citi ThankYou cardmember and resets each year on that date), you will also earn an Anniversary Bonus calculated as a percentage of ThankYou Points earned during the membership year as follows:

Membership Year	Anniversary Bonus
1	1%
1 2	2%
2 and after	3%

Repent Jesus
is Coming

Note the Anniversary Bonus calculation does not include any other points, including bonus ThankYou Points, you may have earned during that membership year. It may take 1-3 billing statements for the Anniversary Bonus to post to your Card Account at the end of each membership year.

You may earn ThankYou Points as long as your Card Account is open and current. If your Card Account is closed, you will not be able to earn ThankYou Points and you will lose any accumulated ThankYou Points that have not been transferred to your ThankYou Member Account. Balance transfers, cash advances, convenience checks, returned purchases, disputed or unauthorized purchases/fraudulent transactions, finance charges, Card Account fees, and fees for services and programs you elect to receive through us do not earn ThankYou Points unless otherwise specified.

If you are approved for a Card Account, a ThankYou Rewards transfer Account ("ThankYou Account Account") will be set up for you. ThankYou Points post to your Card Account at the close of each billing cycle and at that time we will transfer the ThankYou Points you earned to your ThankYou Member Account. ThankYou Points are not eligible for redemption until they are transferred to your ThankYou Member Account. ThankYou Points may not be redeemed and may be lost if your Card Account is not open or current.

TERMS AND CONDITIONS OF OFFER

This offer is only valid for new accounts. You must be at least 18 years of age. If you are married, you may apply for a separate account. Citibank, N.A. ("we" or "us") is the issuer of your account. Citibank, N.A. is located in Sioux Falls, SD.

Federal law requires us to obtain, verify and record information that identifies each person who opens an account, in order to help the government fight the funding of terrorism and money laundering activities. To process the application, we must have your name, street address, date of birth and other identifying information, and we may ask for identifying documents from you as well.

To process the application for a new account, it must be:
1. Accurately completed,
2. Signed and verifiably correct, and
3. Returned by the expiration date.

Please send the non-transferable application in the enclosed postage-paid envelope to:
Citibank New Cardmember Services
P.O. Box 6500, Sioux Falls, South Dakota 57117-6230

Please allow four weeks from date of mailing to process a completed application.

We may gather information about you, including from your employer, your bank, credit bureaus, and others, to verify your identity and determine your eligibility for credit, renewal of credit and future extensions of credit. If you ask us, we will tell you whether or not we requested a credit bureau report and the names and addresses of any credit bureaus that provided us with such reports.

To receive a Citi ThankYou Card, you must meet our applicable criteria bearing on creditworthiness. Your credit limit will be determined by your annual salary and wages, your other annual income and a review of your debts, including the debt listed on your credit report. You will be informed of the amount of your credit limit when you receive your card. Some credit limits may be as low as $500. Please note that cash advances may be limited to a portion of your credit limit.

Balance transfers are made available at our discretion. All balance transfers are subject to the standard purchase APR unless an introductory or other promotional rate applies. It will take at least 14 days after your account is opened to process balance transfer payments. During the time you may cancel or modify your balance transfer request by calling the number on the back of your card.

Please see the enclosed Additional Disclosures for important information.

Notice to Ohio Residents: The Ohio laws against discrimination require that all creditors make credit equally available to all creditworthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law.

Notice to Wisconsin Residents: No marital property agreement, unilateral statement, or court decree adversely affects our rights, unless you give us a copy of such agreement, statement, or court order before we grant you credit, or we have actual knowledge of its terms before your Account is opened.

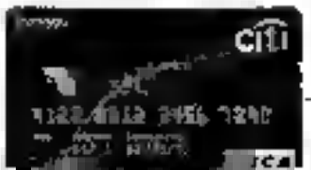
PRESCREEN & OPT-OUT NOTICE: PRESCREEN & OPT-OUT NOTICE: This "prescreened" offer of credit is based on information in your credit report indicating that you meet certain criteria. This offer is not guaranteed if you do not meet our criteria. If you do not want to receive prescreened offers of credit from this and other companies, call the consumer reporting agencies toll-free at 1-888-5-OPTOUT (1-888-567-8688) or write to any of the following consumer reporting agencies: Experian Information Solutions, P.O. Box 919, Allen, TX 75013; Equifax Options, P.O. Box 740123, Atlanta, GA 30374-0123; Transunion, P.O. Box 505, Woodlyn, PA 19094-0505.

BALANCE TRANSFER INSTRUCTIONS

Just follow these simple steps to start saving money by transferring balances from your high-interest credit cards.

1. Complete the Balance Transfer Option on your Application Form. You may transfer any amount, but the total amount of your balance transfers and balance transfer fees must be less than your available credit limit. You should not transfer the amount of any disputed purchase or other charge. If you do, you may lose your dispute rights. You may not transfer balances from other accounts issued by Citibank, N.A. or its affiliates.
2. Continue to pay the other credit card issuer until we notify you in writing that we have approved the Amount Transfer. When we do, we pay the amount of the Amount Transfer directly to that issuer. It will take at least 14 days after your account is opened to process balance transfer payments. During this time you may cancel or modify your balance transfer Amount by calling the number on the back of your card.
3. Keep your account in good standing. If you default under your card agreement, you may lose any promotional APR on the balance transfer. We may not Amount future balance transfers.

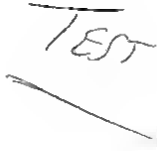
* ThankYou Point values and the rewards available for redemption are subject to change at any time. Check www.thankyou.com for the most up-to-date reward selection. Citi is not responsible for products or services offered by other companies.



10 reasons to respond

1. No Annual Fee**

Intended Use


TEST

PLATELET COUNT	282	k/mm3	(130-400)	F
MPV	10.3	fL	(7.5-14)	F
SEGMENTED NEUTROPHILS	48	%	(40-80)	F
LYMPHOCYTES	45	%	(10-45)	F
MONOCYTES	6	%	(3-15)	F
EOSINOPHILS	1	%	(0-7)	F
BASOPHILS	0	%	(0-2)	F
ABSOLUTE NEUTROPHIL	2.3	k/uL	(1.6-8.3)	F
ABSOLUTE LYMPHOCYTE	2.2	k/uL	(0.6-5.5)	F
ABSOLUTE MONOCYTE	0.4	k/uL	(0.1-1.6)	F
ABSOLUTE EOSINOPHIL	0.1	k/uL	(0-0.7)	F
ABSOLUTE BASOPHIL	0.0	k/uL	(0-0.2)	F

Performing Laboratory Information

PAZ Sonora Quest Laboratories 1255 W Washington Tempe AZ 85281

texting fax - you have negative reviews showing on the first page - google

1-2855
1-215-294-29

The SF425 De-Mystified

The Standard Form 425 (SF425), Federal Financial Report (FFR), has replaced the SF269A and SF270 due to the implementation of the Automated Standard Application for Payments (ASAP) system. ASAP has dispensed with the need f recipients to request and receive authorization for reimbursement of their expenditures. The SF425 is a cumulative repor which captures the financial status of an agreement at a specific point in time.

Recipient draws down funds from ASAP as needed for reimbursement of expenditures and submits the FFR according to t reporting frequency specified in Section VII, Deliverables and Reports, of their agreement. The report indicates how muc money has been drawn down, what the funds were used for and the remaining balance left at the end of the reporting period. Each report requires submittal of back-up documentation sufficient to show how the drawn down funds were a located to the budget items in the recipient's SF424A, Section B - Budget Categories (combined amount of the original obligated amount plus any modifications). These documents allow the Program Officer (PO) and Grants Management Officer (GMO) to ensure the project is staying within the parameters of the agreement.

GENERAL INSTRUCTIONS

1. Each agreement requires a separate SF425. Do not use one SF425 to cover multiple agreements.
2. Reports are submitted quarterly, semi-annually, or annually (based on **Calendar Year**) as specified in the agreement. Reporting frequency is determined by the PO and approved by GMO.
3. Reports submitted quarterly or semi-annually are due no later than 30 days past the reporting period end date. Annual reports are due no later than 90 days past the reporting period end date.
4. Final reports are due no later than 90 days past the ***agreement*** expiration date.
5. All amounts are ***cumulative***.
6. All lines must be ***completed*** (enter 0.00 or N/A as applicable on lines with no data to report.)

Block 1. BLM office that awarded the agreement (ex. BLM-Oregon State Office)

Block 2. The **BLM** agreement number (ex. L09AC12345)

Block 3. Recipient address

Block 4a. Recipient DUNS number

Block 4b. Recipient EIN number

Block 5. Recipient identifying account number (if any) *do not enter your bank account information*

Block 6. Reporting frequency as specified in the agreement. The last report for ***the agreement*** (not individual projects/tasks) should be marked ***Final***

Block 7. Recipient accounting method, *Cash* or *Accrual* (*Cash basis refers to the accounting method in which expenses are recorded when they are paid. For accrual basis, expenses are recorded when incurred.*)

Block 8. Date agreement was awarded and date agreement expires (not to be confused with the reporting period end date)

Block 9. The end date of the current reporting period

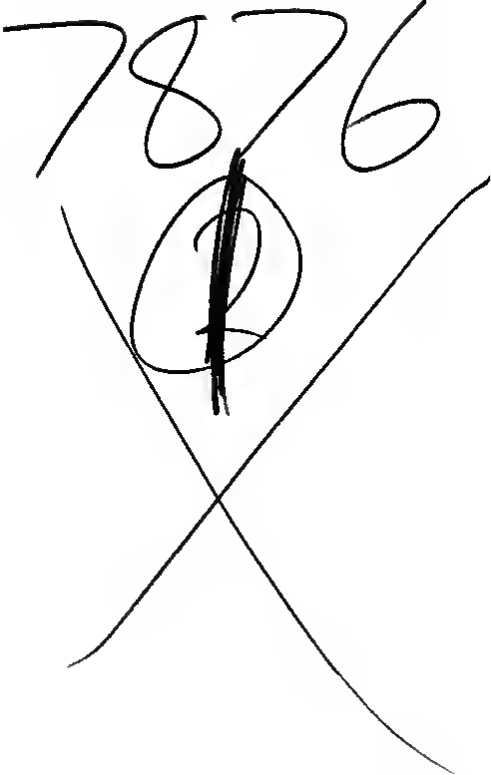
Block 10. Transactions

FEDERAL CASH. Enter cumulative amounts from the date of award through the end date of the current reporting period

- a. Cash receipts - amount of federal funds drawn down from ASAP
- b. Disbursements - amount of ***federal funds*** paid out
  Cash based accounting (a) should equal (b)
  Accrual based accounting (b) is usually greater than (a)
- c. Cash on Hand
  Cash based accounting should be $0.00 as recipient should not have drawdown any funds greater than thos expended. ***If line (c) is greater than $0.00 AN EXPLANATION MUST BE PROVIDED.***
  Accrual based accounting will usually be a negative number representing the amount of money owed to recipient (funds expended but not yet reimbursed)

TEST

[illegible]



Windows XP Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Xerox WorkCentre 5325 PCL6 on INTERGY10

The information below describes your printer driver and port settings

Submitted Time	10:16:21 AM 6/12/2014
Computer name	INTERGY10
Printer name	Xerox (FAX)
Printer model	Xerox WorkCentre 5325 PCL6
Color support	No
Port name(s)	IP_192.168.1.200
Data format	RAW
Share name	
Location	
Comment	
Driver name	UNIDRV.DLL
Data file	xGSANXHM.gpd
Config file	UNIDRVUI.DLL
Help file	UNIDRV.HLP
Driver version	6.00
Environment	Windows NT x86

Additional files used by this driver:

C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\xGSANXHM.ini
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\xGSANXHM.cfg
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2upHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2rpclHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2wftuHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2gntHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2coreHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2utllHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2rnntHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2cpmsHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2jobtHM.exe (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2pLpcHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2fpntHM.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2txtHM.cab
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2GSANIM.cab
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2fpbNM.exe (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\xlibeay.dll
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\x2fpd02.dll (5230, 500, 0, 0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\locale.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\pfdisp.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\pGfont.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\pcl5eres.dll (6 0 5479 0 (vbl_wcp_d2_drivers.060616.1619))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\pc3xl.dll (6 0 5d79 0 (vbl_wcp_d2_drivers.060616.1619))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\pclxl.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\pjl.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\stdnames.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\ttfsub.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\unires.dll (6 1 7600.20630 (win7_ldr.100128-1505))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STDNTYPE.RDL

BCSL

BRITISH COLUMBIA STUDENT LOAN SERVICE BUREAU

P.O. BOX 4678 STATION TERMINAL
VANCOUVER BC V6B 4A4

Tel 1-877 535 7680
Fax 1-877 535-7681

June 30 2012

MADELEINE GIGNAC
10229 143A ST
SURREY BC V3T5C1

SIN 737-610-022
Account Number 1016108

Dear MADELEINE GIGNAC

Re BRITISH COLUMBIA DIRECT LEND STUDENT LOAN (S) INTEREST PAID

Early in 1998, Revenue Canada made changes to the Tax Legislation which allows an individual with Government Student Loans (Federal and Provincial) to claim interest paid status, with the 1998 tax year (excluding any payments made on behalf of students such as Interest Relief and Loan Forgiveness). Please refer to the Income Tax Act for current guidelines.

Accordingly, we advise that the amount of interest you paid on your Government Student Loan(s) during 2012 was $196.86

Please attach this form to your Income Tax Return if you intend to make this claim. Details on the credit and on how to claim it are available in the Federal Income Tax Guide that accompanies your 2012 Tax Return. Information is also available through Revenue Canada's Tax Information Phone Service (TIPS) at 1-800-267-6999 or online at www.canlearn.ca. Additional questions should be directed to your nearest Revenue Canada Office by calling 1-800-959-8281.

If you have any questions regarding the amount of interest paid or any other matter, please feel free to contact any of our Customer Service Representatives toll-free at 1 877 535 7680 or send an e-mail to customerservice@bcslservicebureau.com.

For general information, please visit our web site at www.bcslservicebureau.com

British Columbia Student Loan Service Bureau

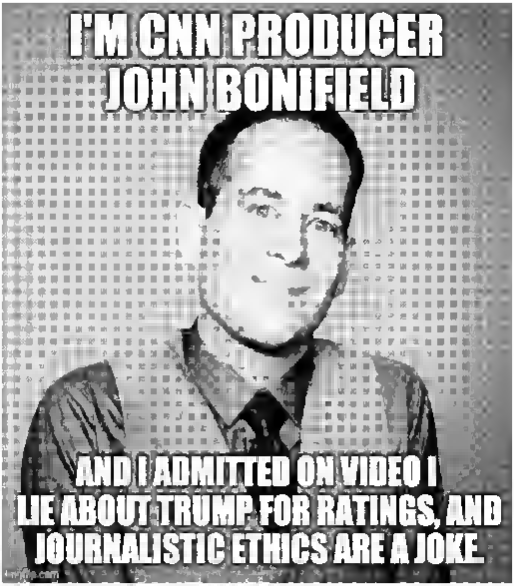
Additional contact information

Loan account details	www.bcslservicebureau.com
Email	customerservice@bcslservicebureau.com
Hours	Monday to Friday 8 am to 8 pm PST

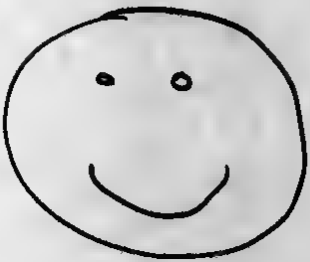
A T
I T

Test

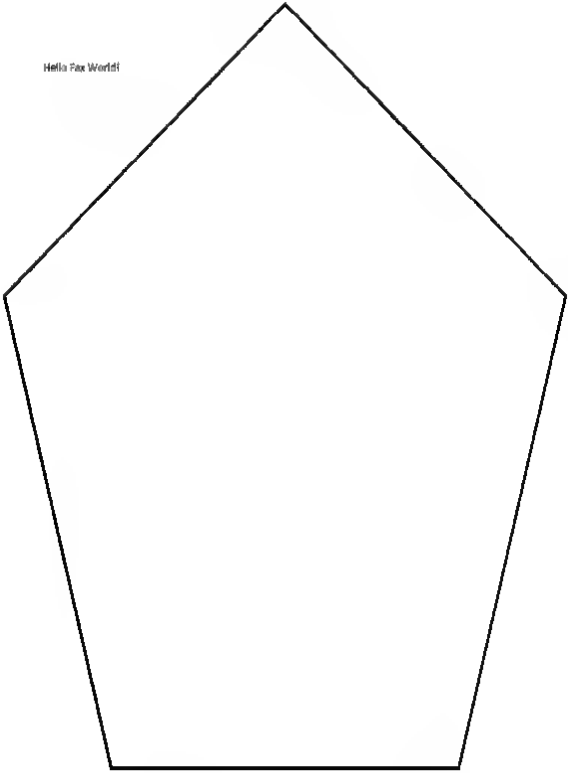
Fax #1


I'M CNN PRODUCER
JOHN BONIFIELD
AND I ADMITTED ON VIDEO I
LIE ABOUT TRUMP FOR RATINGS, AND
JOURNALISTIC ETHICS ARE A JOKE.

FAX
TEST



Hello Fax World!



OTHER TEQUILA MAKERS DON'T HAVE THE STONES.

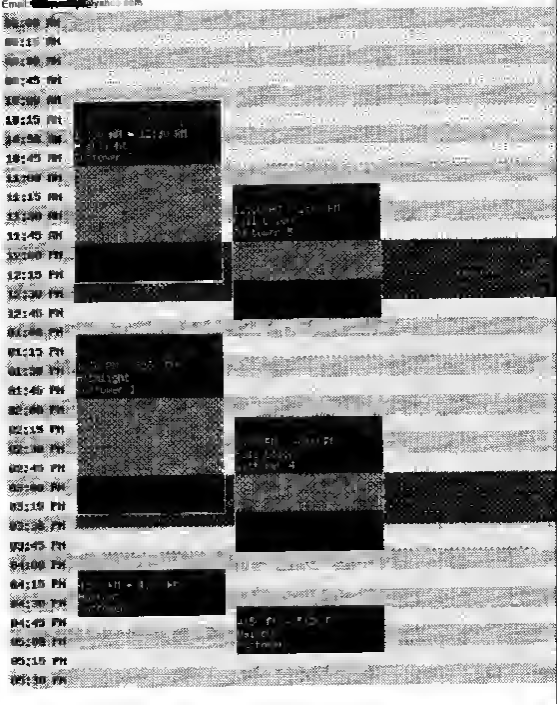
PATRÓN IS ONE OF JUST A HANDFUL OF ARTISANAL TEQUILA MAKERS STILL USING A TAHONA STONE WHEEL TO CRUSH COOKED AGAVE. AN ANCIENT LABOR-INTENSIVE PROCESS THE AGAVE IS THEN FERMENTED AND DISTILLED WITH THE FIBER, GIVING YOU A ROCA PATRÓN A COMPLEX SMOOTH TASTE. EXPLORE THE PROCESS AT PATRONTEQUILA.COM

PATRÓN ® HOW IT'S MADE

What You Can Do For?

1. Web Design
2. E Commerce
3. Phone and Fax Service
4. Google Apps Setup
5. Cloud Computing
6. Email Servers, Web Server Radio Servers
7. Tax Preparation
8. Health and Life Insurance
9. Bookkeeping and Payroll Services
10. Business Plans
11. Financial Reports
12. IRS and State Representation
13. Routers, Wireless and Networking
14. Computer Backup and Data Recovery
15. Computer Building and Repairs (Desktop and Servers)
16. Sales and Marketing (i.e. salesforce)
17. Athletic and Fitness Training (Baseball)
18. Catering and Food Services
19. XBMC (Multi-media box) – watching tv, movies, theatre
20. Burn CD, DVDs from home movies and private collection
21. Create Slideshows and Presentation
22. Online Webhosting Services
23. Database Collection and Setup
24. Professional Microsoft Office Suite
25. Professional Adobe Suite
26. Flyers, Business Card and Logos
27. Reduce Cost on Ink and Paper

An appointment (Haircut - Stylist 9) was made for Thu May 26, 2005 at 8:15 AM. This is the status for this date
Name: [redacted]
Phone: (123) 456-7890
Email: [redacted]@yahoo.com



test

LAN Party!

FITES.net

"C102"

Vonage Test Fax

To: 510 545-0990	From
Fax	Fax
Phone	Phone
Subject Test Fax	Date

Fax Settings

Reference your Owner's Manual for help adjusting the settings below:

ECM (error correction mode)	Off
Baud Rate	9600
International	On (this is set on a per-call basis)
Resolution	Standard
Answer Mode	Fax Only
Rings to Answer	Zero (0)
Call Waiting	Off
Bandwidth Saver	High (80 kbps)
Distinctive Ring	Off

Troubleshooting Steps

The steps below will help you resolve common faxing problems

- Switch off fax machine and unplug power adapter from device and from wall outlet.
  - Let fax machine remain off for 60 seconds
- Try a different phone cord between the fax machine and the Vonage device
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device, bypassing any home wiring.
- If using an All-in-One device, temporarily disconnect device from PC.

Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help

Call us at 1-VONAGE-HELP (1-866-243-4357) or visit **www.vonage.com**.

Hello World!

855-330-1239

TEST

test faxing

FAX TOY 2

I really love my wife!!!

NO…REALLY!!!

1-888-877-1655

Fax Toy

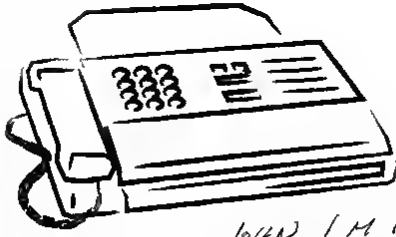
Test Fax

Test fax

How to Send a Test Fax to a Fax Machine

By an eHow Contributor

- Print this article



JOHN I M TESTING

Send a test fax to a fax machine

FAX — ANSWER

When you set up a fax machine and have it connected to a working phone

IF RESOLVED

line, you want to test it to make sure it is working properly. Testing a fax machine will tell you whether you need to troubleshoot your setup or whether the system is functional. You may send a test fax to a fax machine, by using an online fax-testing website.

Other People Are Reading

- How to Send Free Test Faxes
- How Can I Test My FAX Machine?

JOEY R.

Things You'll Need

- Fax machine

Instructions

1. Click on the link for the free Fax Zero service in the Resources Section or find another online fax testing service to send a test fax to your machine.

2. Enter information about the sender and receiver of the fax in the online fax testing

FAX

Recipient: TEST

Sender:

Address:

FAX: 18888771655

TEL:

FAX:

Number of Sheets: 1 page(s) including cover

Date: Wednesday, May 07, 2014

Subject: TEST

TEST MESSAGE

Cats!

Test Fax!!!!

[illegible]eight.com

[illegible]

[illegible]
[illegible]
[illegible]

[illegible]

[illegible]

[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]

[illegible]	[illegible]	[illegible]	[illegible]

[illegible]

[illegible]	[illegible]	[illegible]
	[illegible]	[illegible]

[illegible]

FAX TEST

FlexBen Benefits Plan Claim Form

OFFICE USE ONLY Claim Number: _____

NECA IBEW LOCAL 48

Employee Information

http://harrisonflex.alpn.com

Last Name (Print)	First Name	MI	Phone Number
Street Address	City	State	Zip
☐ Check if new address	Social Security Number		Date of Birth

Submit Claims To
Harrison Flex Plan
1220 SW Harrison Street
Suite 300
Portland OR 97205
Fax (503) 226-0149

Patient Information

INSTRUCTIONS: Please provide claim patient information. Is the patient: ☐ Self ☐ Spouse ☐ Child ☐ Other ☐ other specify _____
NOTE: No patient information required when submitting Explanation of Benefits from insurance company.

Last Name	First Name	MI	Social Security Number	Sex	Date of Birth (mo/day/year)	Disabled	Full Time Student
				☐ M ☐ F		☐ Yes ☐ No	☐ Yes ☐ No
				☐ M ☐ F		☐ Yes ☐ No	☐ Yes ☐ No

Type of Claim

INSTRUCTIONS: Please mark the box for the benefit for which you are submitting a claim. Be sure to refer to your Benefits Booklet re: eligibility requirements and for information on how to apply for each specific benefit.

☐ Supplemental Workers Compensation	☐ Supplemental Unemployment	☐ Benefit Allocation ☐ First half of account ☐ Second half of account	☐ Medical Care Reimbursement Plan*	☐ Premium Pay Plan For Harrison Health Plan Coverage ONLY	☐ Dependent Care Reimbursement Plan ☐ Filing Jointly ☐ Filing Single
You must provide proof of Workers' Compensation payment. Number of weeks requested _____ **Taxable**	You must provide proof of unemployment payment. Date(s) and Number of weeks requested _____ **Taxable** Local _____	Local 48 will verify eligibility You are referring to Local _____ @ Phone number _____ Address _____ _____ **Taxable**	You must submit an Explanation of Benefits showing date and type of service or Medical Care Expense Receipts. Amount requested: $_____ Dates From _____ Thru _____	Amount requested $_____ Partial Payment/Full Payment for Continued Health Coverage *No check generated	Please submit Dependent Care Expense receipts showing dates of service and name, address, and TAX ID number of person(s) performing the service. Amount requested $_____

Signature of Participant

***For expenses incurred on or after January 1, 2011 you will be required to provide a physician's prescription with your Over-the-Counter reimbursement claim request(s), per IRS requirements. Please go to www.irs.gov (refer to publication 502) for more detailed information**

For Dependent Care Reimbursement: I certify that I have no other separate dependent care program through my employer. Please initial here _____.
For Wage Replacement Claims: Please submit a W-4 form along with your claim. If you do not submit a W-4 form, taxes will be taken out based on taxes for a married person, filing jointly. Forms are available at http://harrisonflex.alpn.com or http://www.irs.gov.

I certify that I have read the instructions and that the above information is complete and accurate. I also certify that all claims submitted will be only for me or for my dependents that are eligible for benefits under this plan. Additionally, I certify that there is no other coverage for my dependents or me provided by another insurance company or employer for the benefit that I am seeking coverage. I understand that I will be responsible to reimburse the Trust Fund for all amounts paid in connection with claims for me or my dependents if I make any false statements or misrepresentation on this form or in any claim form or if I conceal any information pertaining to any such claims. I agree to provide the Trust Fund, upon request, with verification of any information. I give permission to Joint Benefit Plan Administrators to examine records pertaining to myself or covered dependents as required to process claims.

Signature of Employee _____ Date _____

FOR MORE INFORMATION ABOUT THESE BENEFIT REQUIREMENTS, SEE YOUR BENEFITS BOOKLET
White-Trust Office Yellow-E.B.S. Pink-Employee

Test

AK 15

Last Transmission Oct. 21 2011 08:15 AM

Name : NEWMAN
Tel : 4174667578

Date	Time	Type	ID	Duration	Pages	Result
Oct.21	08:14AM	Send	18888771655	00:00	0	No Answer

A communication error has occurred during the fax transmission.
If you are sending, please try again and/or call to make sure the
recipient's fax machine is ready to receive faxes.

Test from
LC

Device Settings

Devices

Accu-Chek(R) Aviva Nano

Serial Number: SN-697717
Device time offset: None
Last sync time: 8:39 PM Monday Aug 7 2017

Dexcom G5

Serial Number: sm.dexcm.COM
Device time offset: Last 17 (Hours) 7:36 AM Friday
Last sync time: Apr 7 2017

Insulet OmniPod

Serial Number: 1101(0)(0)(3)
Device time offset: +8h:0m (Hours) 1:57 PM Thursday
Last sync time: Apr 6 2017

Dexcom Share2

Serial Number: sm.dexcm.Share2
Device time offset: 95 1.8 (Hours) 7:36 AM Friday
Last sync time: Feb. 6 2017

Medtronic MiniMed 530G - 551

Serial Number: 551565
Device time offset: +0m:0s (Hours) 11:28 PM Tuesday
Last sync time: Jan 6 2017

Glucose G5

Serial Number: dexcgl.glucose.G5Mobile
Device time offset: 418.0(0)(2) (Hours) 12:00 AM Thursday
Last sync time: Jan 1 1970

Basal Rates

S. ANDLAND — Current

Time		Value (Units)
12:00 am	4:00 am	1.000
4:00 am	8:00 am	3.000
8:00 am	12:00 pm	1.000
12:00 pm	3:00 pm	1.000
3:00 pm	4:30 pm	1.000
4:30 pm	8:00 pm	2.100
8:00 pm	12:00 am	2.100

Total: 47.50

Solus Settings

Medtronic Profile

Insulin Carb Ratio (I:C)

Time		Value (g/U)
12:00 am	12:00 pm	4
12:00 pm	5:00 pm	4
4:00 pm	12:00 am	3

Sensitivity (or Correction)

Time		Value (mg/dL/U)
12:00 am	12:00 am	30

Active Insulin Time

TOTAL TIME

2.0 Hours

BG Target

Time		Value (mg/dL)
12:00 am	5:00 am	80-120
5:00 am	8:00 pm	90-120
8:00 pm	12:00 am	80-120

TRANSMISSION VERIFICATION REPORT

TIME 07/23/2013 05:38
NAME [redacted]
FAX [redacted]
TEL [redacted]
SER.# [redacted]

DATE, TIME 07/23 05:37
FAX NO./NAME [redacted]
DURATION 00:00:21
PAGE(S) 01
RESULT OK
MODE STANDARD ECM

TEST

Test FAX!

(sent using pc-fax)

TRANSMISSION VERIFICATION REPORT

TIME : 02/01/2006 08:25
NAME : TELLER JACKSON LAW
FAX : 0800PRNPARS
TEL : 7234774910
ID # : 08EF6J33E8E1

DATE/TIME
FAX ID NAME
DURATION
PAGE(S)
RESULT
MODE

02/01 08:10
17[illegible]
[illegible]
01
OK
STANDARD

TRANSMISSION VERIFICATION REPORT

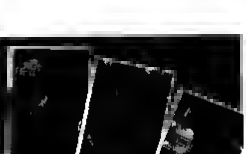
TIME : 01/01/2006 08:10
NAME : TELLER JACKSON LAW
FAX : 0800PRNPARS
TEL : 7234774910
SER. : 08EF6J33E8E1

DATE,TIME
FAX ID NAME
DURATION
PAGE(S)
RESULT
MODE

01/01 08:10
17325467310
00:00:47
01
OK
STANDARD
ECM

Use Genuine Brother Supplies for Genuine Brother Quality!

innobella



Choose Innobella® Ink and Paper for Superior Printing of Photos and Documents

Why Innobella®?

- The Innobella® A cartridge ink system is the result of extensive R&D of over 100 different chemical formulations.
- Innobella® technology:
  - Broad gamut of color reproduction.
  - Produces true-to-life colors.
  - Uses special coatings on Brother papers to achieve a smoother finish, and help eliminate bleeding and smearing of ink.
- Using Innobella® ink and paper together results in high quality printing with vivid colors, sharp images and crisp definition.

Why Genuine Brother Supplies?

Integrated Design, Optimum Performance

- All genuine Brother consumables are designed simultaneously with our extensive as part of an entire printing system.
- Extensive testing ensures optimum performance and component protection.

Using Non-Brother Supplies

- May affect hardware performance, copy quality and machine reliability.
- May affect how extractors fuse to the paper and may affect character formation.

Warranty

- Warranty may not cover damages or malfunction caused by using non-Brother consumables.

brother. at your side

www.brother.com/original

All other brand names and product names are registered trademarks or trademarks of their respective companies.

Innobella is a registered trademark of Brother Industries, Ltd.

Nothing Yet
420 Main St
Mcalester, OK 74501

Invoice: 28
Date: May 15, 2025
Due: Net 30 days
Phone: 9[illegible]
Email: brian@mcalester.net

Brian West
111 Deception
Mcalester, OK 74501

For Services Rendered

Date	Item	Description	Qty	Unit Price	Total
2025-04-03					
LAWN4		Lawn maintenance: weed eating, clean up	1	$65.00	$65.00*

* Non-taxable
Thank you for your business. Please contact us with any questions regarding this invoice.

Invoice Total	$65.00
Due By	[illegible] days

Brian West
111 Deception
Mcalester, OK 74501

For Services Rendered
Invoice #: 28
Due Date: [illegible]
Amount Due: $65.00
Amount Enclosed:

Pay To:
Nothing Yet
420 Main St
Mcalester, OK 74501

TEST

How Can I Test My Fax Machine?

I just hooked up a new fax machine, and I'd like to test it, just to make sure it works. How can I do that?

Presumably, you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both.

To test the send functionality of your fax machine, send a one-page fax to 1-855-330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax.com — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

To test the receive functionality of your fax machine, point your web browser to Faxzero.com; this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

CANON

1-855 FX CANON

1-855-392-2666

1 888 811 1655

fax to: ~~(301) 493-9851~~

from. (301) 983-8795

test

Working for You

Day Care Classrooms:

(Including Multi-Purpose Room)

EACH SERVICE

- Empty trash & replace liners
- Wash and disinfect trash receptacles and lids
- Disinfect door handles & light switches
- Vacuum all hard surface floors and carpets
- Wash & disinfect toilets, toilet seats, sinks, faucets, backsplashes, exposed counters and all soap/toilet/peper towel dispensers
- Clean all mirrors & bright work
- Remove soap spillage from beneath dispensers
- Restock paper products & soap
- Thoroughly mop all hard surface floors [redacted]

Weekly

- Spot clean exteriors of refrigerators to remove prominent smudges and other marks
- Spot clean walls ~~around waste receptacles~~, as needed
- ~~Clean and disinfect kitchen sinks, faucets, and backsplashes.~~
- Dust door frames, window sills & ceiling corners in rooms and hallways
- Clean & disinfect walls & partitions around toilets

Monthly

- Treat toilets & urinals with acid cleaner
- Dust heating / AC vents[redacted]

Whatever you do, do your work heartily as for the Lord rather than for men, knowing that from the Lord you will receive the reward of the inheritance. It is the Lord Christ whom you serve.

Colossians 3:23-24

1888-877-1655

TEST 1

3379

AR

BUSY/NO RESPONSE

DATE,TIME	08/05 02:08
FAX NO./NAME	13178536451
DURATION	02'08"45
PAGE(S)	08
RESULT	BUSY
MODE	STANDARD

TIME 08/05/2017 09:50

TRANSMISSION VERIFICATION REPORT

Children's Orthopaedic Specialists
1905 E. River Road, Suite 191
Tucson, AZ 85718
Phone: (520) 296-5430 Fax: (520) 296-4633

Tes

FAX

Recipient.	Ray Wilfs PC	Sender:	Will Test Test
		Address:	
FAX.	18585771655		
		TEL:	
		FAX.	9729101577

Number of Sheets. 1 page(s) including cover

Date: Wednesday, June 11, 2014

Subject: Computer parts

Need shipment today!

HP Officejet Pro 8500 A909a All-in-One series

Fax Log for
Andrew Schanfield
561-853-0677
Mar 07 2012 11:47AM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Mar 7	11:46AM	Fax Sent	19208631309	0:36	0	Error 368*
				N/A		

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

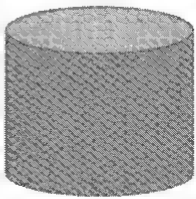
1 920 863 1309

Note

Image on Fax Send Report is set to Off

An image of page 1 will appear here for faxes that are sent as Scan and Fax

This
Is
A



Test

Mary Nord Cook, MD
Child & Adolescent Psychiatrist
Medical Director
Chief Executive Officer
EMPOWER Centers

_____, 2015

Dear _____,

Thank you for referring _____, DOB _____, to EMPOWER Centers. I had the pleasure of seeing _____ on _____ for a psychiatric diagnostic evaluation. A summary of my findings & recommendations includes:

My primary DSM-V/ICD-10 psychiatric diagnoses were:

Mood:
___Major Depressive Disorder (F32.1)
___Dysthymic Disorder (F34.1)
___Disruptive Dysregulated Mood Disorder
___Bipolar Disorder Type I (F31.8)
___Bipolar Disorder Type II (F31.81)
Comments:

Behavioral:
___Attention Deficit Hyperactivity Disorder (F90)
___Oppositional Defiant Disorder (F91.3)
___Disruptive Dysregulated Mood Disorder
___Conduct Disorder (F91)
Comments:

Anxiety:
___Generalized Anxiety Disorder (F41.1)
___Panic Disorder (F41.0)
___Obsessive-Compulsive Disorder (F42)
___Social Phobia (F40.11) ___Specific Phobia (F40.2)
___Separation Anxiety Disorder (F93.0)
___Post-traumatic Stress Disorder (F43.1)

Developmental:
___Reading Disorder (F81.0) ___Enuresis (F98.0)
___Mathematics Disorder (F81.2) ___Encopresis (F98.1)
___Speech-Language Delay (F80)
___Autism Spectrum Disorder (F84)

Eating Disorders: ___Anorexia (F50.0) ___Bulimia (F50.2) ___Binge Eating Disorder
Tic Disorders: ___Tourette's (F95.2) ___Chronic Motor or Vocal Tic Disorder (F95.1)
Substance Use Disorders: ___Cannabis Abuse (F12.1) ___Cannabis Dep (F12.2) ___EtOH Abuse/Dep (F10.1/F10.2)
Other DSM-V/ICD-10 diagnoses included _____

My treatment recommendations were:
___Medication Consultation/Mgt
___Individual Therapy
___Group Therapy
___Family/Marital Therapy
___Educational Assessment/IEP
___Request 504 Plan
___Referral Developmental Services
___Referral Medical Work Up
___Substance Abuse Treatment
___Intensive Outpatient Program
___Admission to Inpatient Psych
___Parenting Training/Coaching
Comments:

I have recommended & provided referrals for follow up to occur with the following providers/groups/organizations:

Please do not hesitate to call (720-778-4077) or email (mary@empowercenters.org) with questions.
Sincerely,

MD

Mary Nord Cook, MD
Child & Adolescent Psychiatrist

From

SS

Thursday, March 06, 2014

Reservation Confirmation
RE PARTY-1-2-3E-3X4
Created: [illegible]
Booking Source: Standalone

Dear Mrs. Patel,

We have received your reservation request for your party at the Hilton Rye Town at Central Park. Your reservation is confirmed. If you have any questions, please contact our Reservations Support Team at 1-800-[illegible] or email support@hilton.com.

Thank You,
The Hilton Team

Guest Information

Please verify that all information is correct and keep this portion for your records. If information is incorrect, please contact us.

Booked by:	Sunil Tejpal	Stay at:	Rye Town
Address:	5 [illegible]	City, State:	Rye, NY
Zip:	10580	Country:	USA
Email:	[illegible]	Telephone Number:	3474[illegible]34

Payment Information

Credit Card:	Visa	Expiration Date:	10/16
Credit Card #:	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Amount Paid:	$ 1,140.00

Reservation Details

Number of Rooms:	1	Number of Nights:	3
Check-in:	Wed, [illegible] 2014	Check-out:	Sat, [illegible] 2014

Guest Information

First Name:	Paul	Last Name:	Patel
Room Type:	Deluxe	Rate:	$ 380.00
	Bed:	King	

Subtotal: $ 1,140.00
Tax (11.000%): $ 125.40 Total Amount Paid: $ 1,265.40

Special Requests: [illegible]

Thank you for choosing Hilton Rye Town. We look forward to your visit.

FAX TEST

Test fix

Test fix

Test fix

HELLO

WORLD!

Recipient Information
To [redacted] (no company)
Fax# [redacted]
Subject

Sender Information
From [redacted]
Pages: 2
Date: Apr 12, 2016

Comments:

FAX COVER SHEET

Hello [redacted] this is a test

If you didn't receive this fax in your email you need:

myfax

Send and receive faxes through your email, online or smartphone.

No paper, ink or 2nd phone line required
It should be a real fax number!

Try it free for 30 days at myfax.com

MyFax and its suppliers reserve all rights with respect to the Software and the Documentation. All rights not expressly granted to Customer in this Agreement are reserved by MyFax and its suppliers. Customer may not, and may not cause or permit others to, reverse engineer, disassemble, decompile, reproduce, adapt or otherwise attempt to discover any source code or underlying ideas or algorithms of the Software (except to the extent applicable laws specifically prohibit such restriction), modify, translate or create derivative works based on the Software (except to the extent expressly permitted by MyFax or authorized within the Services), or export the Software in violation of applicable export control laws and regulations and policies. Customer may not use the Software for any purpose not expressly permitted by this Agreement. Customer shall comply with all applicable laws, regulations and rules in connection with its use of the Software, and shall cooperate with MyFax in MyFax's efforts to monitor Customer's compliance with the foregoing and detect any misuse or unauthorized use of the Software. Customer shall promptly notify MyFax in the event it becomes aware of any unauthorized use of the Software.

TEXT
EAST

ms
Joe!

Status report of fax connection Aug 26.2012 04.36 PM

Name : Jean Schubert
Tel : 623 535 8085

Check Items

1) Product Hardware Check	PASS
2) Phone Cable Connection Check	PASS
3) Connection Port Check	PASS
4) Phone Line Connection Quality Check	PASS
5) Dial Tone Detection	PASS

Status

The fax connection is OK

HP Color LaserJet 2544

CBC/CBCS
(707) 422 3717
Jun 4 2014 9 11AM

Fax Call Report

Job	Data	Time	Type	Identification	Duration	Pages	Result
3649	6/ 4/2014	9 10 18AM	Send	18469771655	0 06	0	No answer

Test
CBC

Ref # 140604-000773

Testing 1,2,3

Testing 1,2,3

Test Fax

To	From
Fax	Fax
Phone	Phone
Subject	Date

Fax Settings

Reference your Owner's Manual for help adjusting the settings below:

ECM (error correction mode)	Off
Baud Rate	9600
International	On (this is set on a per-call basis)
Resolution	Standard
Answer Mode	Fax Only
Rings to Answer	Zero (0)
Call Waiting	Off
Banwidth Saver	High (33 kbps)
Distinctive Ring	Off

Troubleshooting Steps

The steps below will help you resolve common faxing problems

- Switch off fax machine and unplug power adapter from device and from wall outlet
- Let fax machine remain off for 60 seconds.
- Try a different phone cord between the fax machine and the Vonage device
- Eliminate any splitters between the fax machine and the Vonage device

Further Assistance

If you need further assistance using your XXXXXXX Fax Service, we are always available to help. Please see the Support section of your Welcome Guide or visit www.vonage.com.

Device Information

Product Name: HP LaserJet 700 color MFP M775
Device Name: HP LaserJet 775 color MFP M775
Model Number: CC520A
IO Controller Version: B.25
Optional Trays Version: 3.103
Device Serial Number: VNB03304CV
Formatter Number: JC100VL
CPU: 2.1Ghz
SCB: 2xxxBA1415AR 1.0
Firmware Bundle Version: 3.2.5
Firmware Revision: 2302081 426017
Firmware Datecode: 20140625
HP FutureSmart Level: HP FutureSmart 2
Service ID: 24554
Fuser Kit Interval: 150000
Pages Since Last Fuser Maintenance: 79100
Transfer Kit Interval: 150000
Pages Since Last Transfer Maintenance: 81600
Document Feeder Kit Interval: 100000
Pages Since Last Doc Feeder Maintenance: 12973
PS Wait Time out: 300 seconds
Engine Cycles*: 69457
Color Engine Cycles*: 40582
*Not weighted for Duty

Installed Personalities and Options

PCL: 20110402
PCLXL: 2011040
POSTSCRIPT: 20010402
PDF: 20050131
AirPrint: 2342201
Internal Disk: Hard Disk: Enabled
  Serial Number: WJX9L04S
  Model: HP Secure Hard Disk
  Capacity: 500246 MB
  Hard Disk Encryption Status: Encrypted
Internal Fax: Ver10.4
Embedded HP JetDirect 3000W: 10.1.186.240
SMTP Gateway: casarray1.USA.com
LDAP Gateway: 0.0.0.0
Digital Send: Activated
Custom Color Table: Not Installed

HP Web Services

HP Web Services: Disabled
ePrint: Disabled

Color Density

	C	M	Y	K
Highlights	0	0	0	0
Midtones	0	0	0	0
Shadows	0	0	0	0

Calibration Information

Last CPR (Engine Cycles): 69506
Last CPR: 9/14/2015 2:08:05 PM
Last IMAC/IBAC* (Engine Cycles): 69439
Last IMAC/IBAC*: 9/14/2015 12:09:37 PM

Memory

Total RAM: 1536 MB

Event Log

Number of Entries in Use: 270
Three Most Recent Entries

Number	Cycles	Event
255	69449	30.13.02
254	69081	50.13.13
253	69081	42.04.03

Security

Hard Disk Encryption Status
  Internal Disk: Encrypted
Job Data Encryption Status: Encrypted
Job Data Persistence: Persistent (not volatile)
File Erase Mode: Non-Secure Fast Erase (No overwrite)
Control Panel Password: Disabled
Smart Card: JOBY 4756 0920
Card: USB plug and play: Enabled
Device USB: Enabled

Paper Trays and Options

Default Paper Size: Letter (8.5x11)
Tray 1 Size: Any Size
Tray 1 Type: Any Type
Tray 2 Size: A4 (210x297 mm)
Tray 2 Type: Plain
Tray 3 Size: A4 (210x297 mm)
Tray 3 Type: Plain
Tray 4 Size: Legal (8.5x14)
Tray 4 Type: Plain
Tray 5 Size: Letter (8.5x11)
Tray 5 Type: Plain
Duplex Unit
Device Name: HP 500-Sheet Stapler/Stacker
Model: CC729A
Manufacturer: NEWLETT PACKARD
Firmware Revision: MTNQ.25
  1 Output Bin 1: 500 Sheets: Lower Bin
  2 Output Bin 2: 500 Sheets: Upper Bin

Windows Printer Test Page

You have correctly installed your Epson ESC/P-R V4 Class Driver on DC_DOCTOR.

PRINTER PROPERTIES

Submitted Time:	11:16:19 AM
Date:	3/28/2018
User Name:	DC_DOCTOR\Doctor
Computer Name:	DC_DOCTOR
Printer Name:	EPSONESCDDA (WF-4530 Series)
Printer Model:	Epson ESC/P-R V4 Class Driver
Color Support:	Yes
Port Name(s):	192.168.23.220
Data Format:	RAW
Printer Share Name:	
Print Processor:	winprint
OS Environment:	Windows x64

PRINT DRIVER PROPERTIES

Driver Name:	Epson ESC/P-R V4 Class Driver
Driver Type:	Type 4 - User Mode
Driver Version:	10.0.14393.0

ADDITIONAL PRINT DRIVER FILES

C:\Windows\System32\DriverStore\FileRepository\prnepcl2.inf_amd64_2d8372285c772b37\EPSNXR1-manifest.ini
C:\windows\System32\DriverStore\FileRepository\prnepcl2.inf_amd64_2d8372285c772b37\amd64\EPSNXR2.DLL
C:\windows\System32\DriverStore\FileRepository\prnepcl2.inf_amd64_2d8372285c772b37\amd64\EPSNXR1.DLL
C:\windows\System32\DriverStore\FileRepository\prnepcl2.inf_amd64_2d8372285c772b37\EPSNXR1-PipelineConfig.XML
C:\windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_a233a12d01c18082\Amd64\UNIRES.DLL
C:\windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_a233a12d01c18082_Amd64\STDNAMES.GPD
C:\windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_a233a12d01c18082\Amd64\STDDTYPE.GDL
C:\windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_a233a12d01c18082\Amd64\STDSCHEM.GDL
C:\windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_a233a12d01c18082\Amd64\STDSCHMX.GDL
C:\windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_a233a12d01c18082\Amd64\MXPSINC.GPD

Pier 121

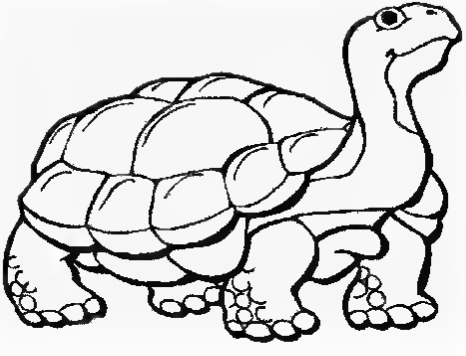
Marina

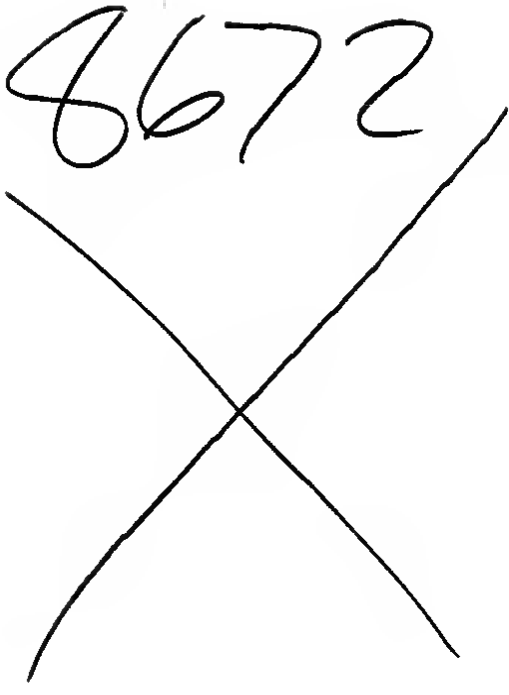
Test Fax

Test

Fax

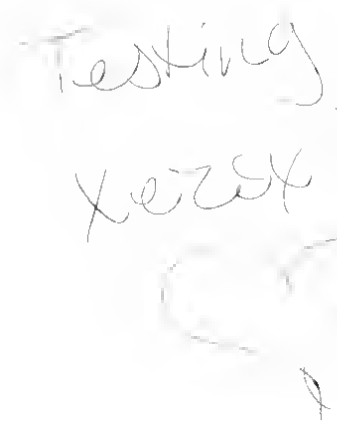
#2




8672

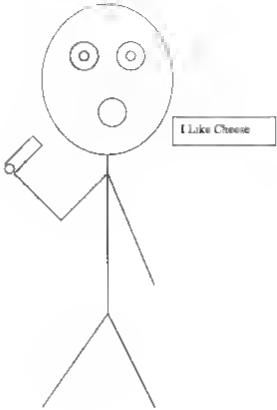
Phone: **Stre** Cell Tax Number: **5555555555**

© 2004 by Cool Screen Press. Download this file cover sheet and more from www.FreeResumes.net


Testing
Xerox Fax

Test Fax

213-294-8943


I Like Cheese

JUST TESTING

THANKS

TEST
FAX

Test

Fax

KMBS B4050, B4750, C3350, & C3850 Setup Checklist
Bizhub 4000P, 3300P, & 4700P Setup Checklist on back

____ A tech machine ID #_____ to copier

____ (B4050/4750 only) Clean pickup rollers with alcohol and a white towel.

____ Service Mode > System 1 >Sleep ON/OFF Choice Setting > Allow

____ Print a Configuration Page to check firmware versions. Utility > User Settings > Printer Settings > Print Reports
Empty glass and ADF Update the Controller and Engine firmware with flash drive in service mode

____ If machine has already been on Demo ensure that ALL old customer information has been removed

____ Utility > Accessibility > Sound Settings > **Only** caution sounds may remain ON

____ Admin Settings [12345678] > System Settings > Daylight Savings Time > 60 minutes
Adjust time if needed: Admin Settings > Machine Settings > Date & Time Settings

____ Admin Mode > System Settings > Power Supply > Set Low Power Mode to **55** and Sleep mode to OFF

____ If fax is installed: Utility > Administrator Settings > Fax Settings > Header Info. >
Sender = customer name; Sender Fax No. = their fax number

____ Utility > Administrator Settings > Network > TCP/IP > Raw Port > Bidirectional – **ON**

____ Configure machine for printing (according to local branch protocol) and run a "Test Print" Save result

____ Update scan information as indicated by pages taped to a column in center of the shop.

Using PageScope, set Total Counter Notification to **Wednesday**

____ Set Auto Color so that default is "Black" **AND** set default Scanning to "Black"
Change to Black then Utility > User Setting > Copier Settings > Default Copy Setting > Current Setting
Black then > User Setting > Scan/Fax Settings > Default Scan Setting > Current Setting

____ Using white Avery labels, create stickers for machine accessories that are inside the machine or that only have a serial number on the box. The label should have the product and its serial number

____ Make sure that HTTP v Core has been set up for machine

____ Print/Copy 25 sheets through the tray(s) and the Multipurpose Feeder
Test duplex on one of the trays and print an image to use as a demo page
Test ADF Don't just print to each tray from the PC

____ Ensure that all serial #'s, meter readings and setup tech # are recorded on EDF Ensure that all books, CD's and power cord are with machine, and all covers are clean and paper is loaded in each tray **If machine is going said place additional toner with machine for delivery** Bill off toner

____ **Out Audit**: 1 Completed EDF 2 Counter List page (Utility > User Settings > Print Settings > Print Reports)
3. Fresh Configuration Page 4 This Checklist 5 Demo Page (sent from PC) 6 Glass copy of the Demo Page
7. Network Test Print 8 TX and RX pages (if fax is present) 9 VCore Log 10 Completed Work Order

_____ _____ _____
Tech Name and Number Date

```
* * *  Communication Result Report ( Jun 27  2013 10:41AM ) * * *
                                                         1)
Date/Time: Jun 27  2013 10:39AM

File                                                              Page
 No. Mode              Destination            Pg(s)    Result     Not Sent
---- --------      ---------------------      -----    ---------  --------
0237 Memory TX      18008771655               P.  6    [illegible]  P. 1

     Reason for error                          E. 2)  Busy
  E. 1)  [illegible]                           E. 4)  No facsimile [illegible]
```

[illegible]

RCV # RC30060
-08/10/00

RECI

RECEIVE[NO]

PO# A9K0-0

ITEM ID	DESCRIPTION
QNT RCV COST	TOTAL
C804-GB0-PS3B	PS3 CARRYING CASE
0 4	36 00 144 00

144 00

Inspected By Alejandra Ale.
(Please print your full name)

Signature X

Received By Warehouse
(Please print your full name)

Signture X

reaches the queue. If you don't receive an email in 10 minutes, there has been a problem with sending your fax and you should try again.

Last Transaction

Date	Time	Type	Station ID	Duration Digital Fax	Pages	Result
May 19	12:31PM	Fax Sent	8418261	0:00 N/A	0	No answer

Note:

Image on Fax Send Report is set to Off

An image of page 1 will appear here for faxes that are sent as Scan and Fax.

106 — 110

6

7

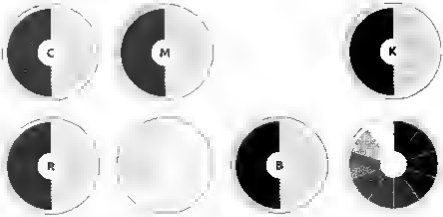
8

This is a test

Test 1

Printer test page

ubuntu



Media Limits: 0.17 x 0.17 [illegible] 8.10 x 11.93 inches
Job ID: MFCL2700DW-1
Driver: MFCL2700.PPD
Driver Version: 1.00
Description: MFCL2700DW
[illegible]
Make and Model: Brother MFC-L2700DW for CUPS
Printer: MFCL2700DW
Created at: Tue Dec 15 12:47:37 2015
Printed at: Tue Dec 15 12:47:37 2015

This is a test fax in PDF Format. 000

You must scan this alignment page for best print quality.

STEP 1 Lift the lid. Place the alignment page face down on the right front corner of the glass. Close the lid.

STEP 2 Press OK.

Central FAX Number Change

Now that the USPTO has gone to a centralized fax receiving point
there is only one official fax number for application specific correspondence with the USPTO. Note that OACS form paragraphs 7.101 and 7.102 will be updated with this new central official facsimile number in the August OACS release.

On July 15, 2005, the Central FAX Number will change to

571-273-8300

TEACHERS

Programs are offered through University of Central Florida, Division of Continuing Education, in collaboration with the Institute of Reading Development. Program design and instructional support are provided by the Institute of Reading Development.

"I would like to thank you for such a positive outcome with my son James. He learned skills that have translated into wonderful grades, and more importantly, have given him more confidence in his reading abilities. He has actually asked to go to the library to pick out a book!"

– Parent of 4th grader

CLASS SCHEDULE

All programs meet once each week. Tuition varies by program grade. Please ask about our family discount.

Choose the grade your child will enter in Fall 2017

KISSIMMEE - University of Central Florida
Valencia Osceola Campus, 1800 Denn John Lane
2nd Grade Fri June 9 July 7 9am 10 30am
5th Grade Fri June 9 July 7 11am 12 45pm
8th 9th Grades Fri June 9–July 7 1 15pm–3 15pm

ORLANDO (WEST) - University of Central Florida
Valencia West, 1800 South Kirkman Road
4 year old & K Sun June 11 July 9 9 30am-10 30am
1st Grade Sun June 11 July 9 11am-12 30pm
2nd Grade Sun June 11 July 9, 1 15pm-2 45pm
3rd Grade Thu June 8 July 6 2pm 3 30pm
9th 11th Grades Thu June 8 July 6 4pm 5pm
12th Grade & Adults Thu June 8 July 6 6 30pm-8 30pm

CLERMONT - University of Central Florida,
South Lake Campus 1250 North Hancock Road
4 year old & K Wed June 7 July 5, 9am 10am
1st Grade Wed June 7 July 5 10 30am 12pm
2nd Grade Wed June 7 July 5, 12 45pm-2 15pm
3rd Grade Thu June 8 July 6 9am 10 30am
4th Grade Wed June 7–July 5, 2 45pm 4 30pm
5th Grade Thu June 8 July 6 11am 12 45pm
6th 8th Grades Thu June 8 July 6, 1 15pm 3 15pm
9th 12th Grades Mon June 5 July 3 4pm 6pm
12th Grade & Adults Mon June 5 July 3, 6 30pm 8 30pm

KISSIMMEE - University of Central Florida
Valencia Osceola Campus, 1800 Denn John Lane
4 year old & K Sun., July 16 Aug 13 9 30am 10 30am
1st Grade Sun July 16–Aug 13 11am 12 30pm
3rd Grade Sun July 16 Aug 13 3 45pm 5 15pm
4th Grade Sun July 16 Aug 13 3 45pm 5 30pm
6th–8th Grades Sun July 16 Aug 13 1 15pm 3 15pm
9th–11th Grades Sun July 16 Aug 13 1 15pm 3 15pm
12th Grade & Adults Wed July 12 Aug 9 6 30pm–8 30pm

ORLANDO (WEST) - University of Central Florida
Valencia West 1800 South Kirkman Road
5th Grade Tue July 11 Aug 8 11 45am–1 30pm
6th 8th Grades Tue July 11 Aug 8 2pm 4pm

ORLANDO (SOUTH) - Nova Southeastern University
4850 Millenia Boulevard
4 year old & K Sat July 15 Aug 12 9am 10am
1st Grade Sat July 15–Aug 12 10 30am 12pm
2nd Grade Sat July 15 Aug 12 10 30am 12pm
3rd Grade Sat July 15 Aug 12, 3pm 4 30pm
4th Grade Sat July 15 Aug 12 12 45pm 2 30pm
5th Grade Sat July 15 Aug 12, 12 45pm 2 30pm
6th 8th Grades Sat July 15 Aug 12, 3pm–5pm
9th–11th Grades Thu July 13 Aug 10 4pm 6pm
12th Grade & Adults Thu July 13 Aug 10 6 30pm 8 30pm

More reading programs are scheduled at nearby locations

Inquire early!
Class size is limited.

Program Code 362-67 13385

FOR MORE INFORMATION OR TO REGISTER
Call the Institute of Reading Development at
(800) 714-9194

MON–FRI 9AM–10PM
SAT 9AM–7PM
SUN 10AM–6PM

Google Search I'm Feeling Lucky

Live from space. 250 miles above Earth. Watch the YouTube Space Lab experiments

Mike
Cal

7 Choose the correct Receive Mode

The six *Receive Modes* is determined by 1 external devices and telephone subscriber services (Voice Mail, Distinctive Ring, etc.) you have on the same line as the Brother machine.

Will you be using a Distinctive Ring number for receiving faxes?
Ringing uses the term Distinctive Ring, but telephone companies may have other names for this service such as Custom Ringing, Ring Master, Personal Ring, Teaching, Ident-A-Call, and Smart Ring, etc. *Distinctive Ring* is explained in the *Basic User's Guide* for instruction on setting up your machine using this feature.

Will you be using Voicemail on the same telephone line as your Brother machine?
If you have Voice Mail on the same telephone line as your Brother machine, there is a strong possibility that Voice Mail will override Brother machines will control which incoming calls are answered manually (See Voice Mail in chapter 8 in the *Basic User's Guide* for instructions on how to set up your machine using this service).

Will you be using a Telephone Answering Device on the same telephone line as your Brother machine?
Your external telephone answering device (TAD) will answer every call. Voice messages are stored on the external TAD and fax messages are printed. Choose External TAD for this receive mode. See the instructions below. For additional information see *Connecting an external TAD (telephone answering device)* in chapter 6 in the *Basic User's Guide*.

Will you be using your Brother machine on a dedicated fax line?
Your machine automatically answers every call as a fax. Choose Fax Only as your receive mode. See the instructions below.

Will you be using your Brother machine on the same line as your telephone?

Do you want to receive voice calls and faxes automatically?
The fax tones are made and sent when you or the person you are calling presses Start (or Black Start or Color Start) after dialing. See the instructions below. For additional information see *Fax/Tel* in chapter 6 in the *Basic User's Guide* for more details on setting your machine using this receive mode.
Important Note: You cannot receive voice messages or other voice sounds on an answering machine when choosing Fax/Tel mode.

Do you want to receive very few faxes?
Choose Manual as your receive mode. For voice calls, you must pick up the phone and press Speak on the Remote Activation code. See the instructions below.

Q *For details, see Using receive modes to choose in the Basic User's Guide.*

a Press Menu.

b Press ▲ or ▼ to choose Initial Setup.
Press OK.

c Press ▲ or ▼ to choose receive mode.

d Press ▲ or ▼ to choose the receive mode.
Press OK.

e Press Stop/Exit.

Note
If you have other answering machines, make sure the Distinctive Ring feature is set to Off. (See Turning off Distinctive Ring in chapter 6 in the *Basic User's Guide*.)

PACKING SLIP

INVOICE NUMBER 0376147-IN
INVOICE DATE 8/31/2006
ORDER NUMBER AD12949
ORDER DATE 8/31/2006
CUSTOMER NUMBER ADIINCU

BILL TO:
ADIR INTERNATIONAL / LA CURA
1865 W. OLYMPIC BLVD
SUITE 200
LOS ANGELES CA 90015 USA
TEL. (213) 386-4412
FAX. (213) 386-2801

SHIP TO:
Ship Code: 1000
ADIR INTL/LA CURACAO-SANTA ANA
18111 HARBOR BLVD
FOUNTAIN VALLEY CA 92708 USA

CUST P O #: ASHK-0
SHIP DATE:
TERMS: Net 45
SALES REP SR
NO OF PCKGS
F.O.B.
TOT WT (lbs):
SHIP VIA:

LINE NO	UPC/SKU/PLU/ASIN	WHSE	ITEM DESCRIPTION	QTY ORDERED	QTY BACK ORDERED	QTY SHIPPED	UNIT PRICE	AMOUNT
1	882058101848	000	NDS BIGFOOT COLLISION COURSE	9	0	9		
2	878278129061	000	PS2 BEN 10 ALIEN FORCE	2	0	2		
3	722674100038	000	PS2 TEKKEN 5	9	0	9		

ADIRX TOTAL SHIP QTY: 20

Any claim for damaged merchandise should be filed with carrier at time of delivery. Other claims, if any, should be filed and faxed to Pioneer Distributors, Inc. within 2 days from date of delivery. No returns will be credited to your account without a return merchandise without A 2% monthly interest fee will be added to your account for late payment. A $50 penalty will be posted to your account for credited without

FAX COVER SHEET

DATE _____

TO _____

FAX NUMBER _____

FROM _____

FAX _____

PHONE _____

MESSAGE

_____

_____

_____

_____

_____

_____

FAX
Testing...

Total $18.82

Customer details

- Email address sam@electronicsexpress.com
- Phone 6152302564

Billing address

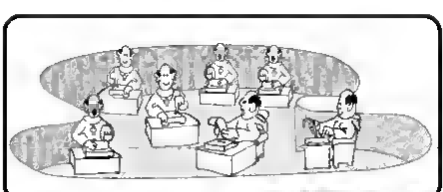
Dew Jhones
Jhones Industries
418 Herring Industrial dr
Nashville TN 37013

Shipping address

Amy Heartfield
158 hickory hollow pl
Nashville, TN 37013

TO **Fax Toy**	FROM **Stro**
FAX # **12132942943**	FAX #
DATE **Now**	# OF PAGES **1**
NOTE	

Test



There ere no etheists in fax holes

Just because I don't care doesn't mean I don't understand.

- Homer Simpson

Test

FAX

Date 01/23/12

Total number of pages 1

To 18888771655@fx.firstteam.com

Company

Department

Fax number 18888771655

From Cristopher Garcia

Subject.Test

Test

Sent from my iPhone

Rowan Public Library

2016 Bookmark Contest

Rules and Guidelines

1) Contest is for children ages 4-11 years old.

2) Entries must be done without adult or sibling assistance

3) Designs must be original. Bookmarks using copyrighted characters and elements (Pete the Cat, Harry Potter, Disney cartoons, etc.) will not be judged

4) Markers, crayons and pens work best. Do not use stickers or other attached decorations. Judges will consider what shows up best when a bookmark is reproduced.

5) Entries will be accepted at any library location until **Saturday, November 5, 2016**

Bookmark Theme should center around books, reading, libraries or literacy

Prizes will be awarded in three categories.
Ages 4-6 Ages 7-9 Ages 10-11

1st Place: Bookmark printed and distributed by RPL. $25 cash prize.

2nd Place $15 cash prize.

3rd Place: $10 cash prize.

Winners will be announced the week of November 11th.

Prizes will be distributed December 5th at the Friends of Rowan Public Library Winners' Reception.

Child's Name _____

Age _____ **School** _____

Phone _____

Parent/Guardian Signature _____

Your child's likeness may be used for promotional purposes and media articles.

Contest Sponsored by:

FRIENDS OF ROWAN PUBLIC LIBRARY

Rowan Public Library—inspiring the spirit of exploration and the power of imagination, promoting the joy of reading and supporting the life long pursuit of knowledge for all people

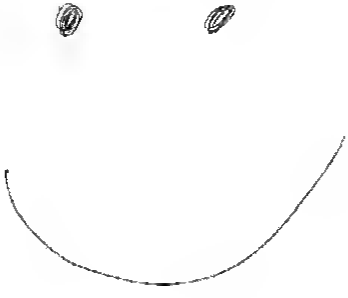
Proofs of evidence. Gas and Oil Developments. Glovers Lake Road.

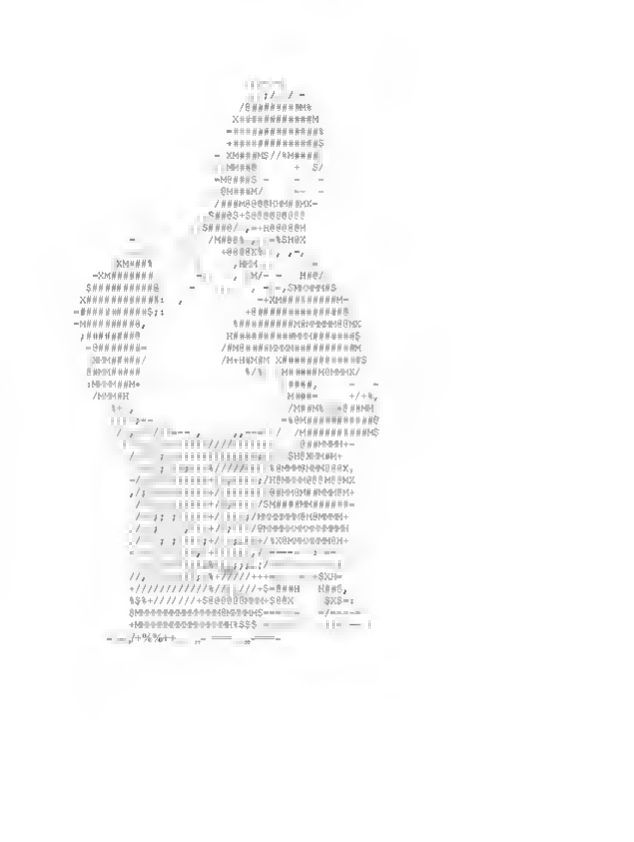
Updated Pictures Video and Story-Lines will be faxed this week

A series of 4 gas pipes (34inchs) Which does not include the huge series of p pes on the North side of Glovers lake road

TEST

1855 330 1239





1-888-877-165

Windows Printer Test Page

2/2/10

Congratulations!

If you can read this information, you have correctly installed your Samsung ML 2510 Series on CITRUS-HOME-PC

The information below describes your printer driver and port settings

Submitted Time	11:41:07 PM 2/2/2010
Computer name	CITRUS-HOME-PC
Printer name	Samsung ML-2510 series
Printer model	Samsung ML-2510 series
Color support	Yes
Port name(s)	192.168.0.5
Data format	RAW
Share name	
Location	
Comment	
Driver name	sugo3.dll
Data file	sugo3pp.dll
Config file	sugo3ui.dll
Driver version	4.00
Environment	Windows x64
Monitor	SUGO3 Langmon

This is a cheap fax Testing 123... SK

Additional files used by this driver

C:\Windows\system32\spool\DRIVERS\x64\3\sugo3u.dll	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3u2.dll	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3r.dll	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3cm.dll	(0, 5, 2, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3lf.dll	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3um.dll	(0, 3, 6, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3um.xml	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3cm.ctd	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3m.dll	(1, 0, 0, 1)
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3ex.exe	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3w1.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3w2.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3w3.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3pp.ver	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3u.fnt	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3ua.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3ub.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3ul.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3u.bmp	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3mb.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3bp.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3cp.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3cc.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3cx.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3dn.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3dr.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3el.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3en.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3fi.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3fn.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3gr.dat	
C:\Windows\system32\spool\DRIVERS\x64\3\sugo3hb.dat	

DANNY
BROWN

REUNION

DATE

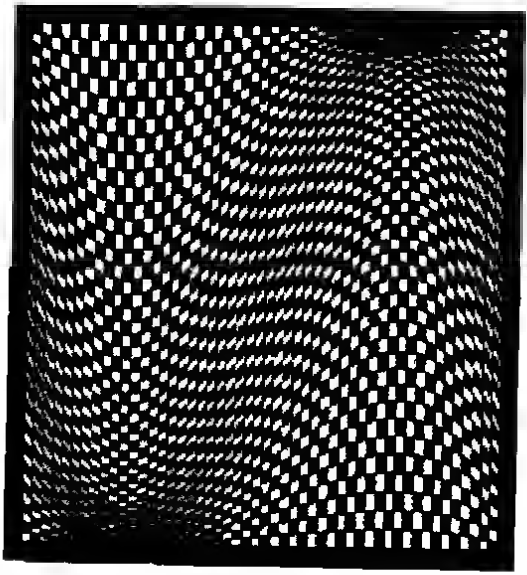
AT

URNEY TO WELLNESS

ST FAX INTEGRATION

IS IS A .GIF FILE

Test Doc for Faxing
Please Ignore



Test, Bob

Page reserved for Excuse note if one was ordered

TEST

FAX

3

TEST 1

6237

AK

FAX

To: test
Company
Fax 12132942943
Phone

From: Administrator
Fax
Phone
E-mail [redacted]

NOTES:

test

Date and time of transmission Tuesday, December 8, 2015 [redacted] AM
Number of pages including this cover sheet 01

This document has only one page

Switching Made Easy

Samsung Smart Switch

Easily move your contacts, text messages, music, and other media from your previous device to your new device. You can also use a cable to transfer data between devices with the Samsung USB connector (an adapter may be required for flash drives and keyboards, etc.). Download Samsung Smart Switch Mobile from Galaxy Apps or Google Play and follow the instructions. Learn more at SamsungSmartSwitch.com.

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confidential

fax

To	**test**
Fax Number	18888771655
From	**Tiffany Thomas**
Fax Number	
Business Phone	
Home Phone	
Pages	1
Date/Time	10/23/2013 10:22:33 AM
Subject	??

??

Windows XP
Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Black Ice Printer Driver on RON_WARD_XP

The information below describes your printer driver and port settings

Submitted Time	2:02:34 PM 03/05/2003
Computer name	RON_WARD_XP
Printer name	Black Ice Fax
Printer model	Black Ice Printer Driver
Color support	No
Port name(s)	BIPORT
Data format	RAW
Share name	
Location	
Comment	
Driver name	blicent.dll
Data file	blicent.ini
Config file	blicenf.dll
Driver version	5.02
Environment	Windows NT x86

Additional files used by this driver
C:\WINDOWS\System32\spool\DRIVERS\W32X86\2\bi_res.dll (2.00)

This is the end of the printer test page.

Banyan Tree Park
LAHAINA MAUI

Product Registration (PIXMA MX892)

Thank you Sylvain, your registration is complete.

YouTube
CONNECT WITH CANON

Visit our official Canon YouTube page and discover educational inspirational and empowering content developed to help you achieve the best results with your Canon products. Visit YouTube.com/CanonUSA today!

Thank you for participating in our Register and Receive promotion. Please accept our offer to receive 50% off select photo paper exclusively at the Canon Online Store. This offer excludes ink, value combo packs, clearance papers, SELPHY paper/ink cartridges and film art paper. To take advantage of this special offer, simply enter priority code PC30R0T during checkout. Click here to visit the Canon Online Store today! Priority code good through February 15, 2013.* Please print this page for your reference to redeem your priority code.

CANON ONLINE STORE

DON'T FORGET TO CHECK OUT OUR GREAT PROMOTIONS!

*The above priority code must be entered at checkout to receive offer. Offer valid upon submission of properly completed Canon Printer Product Registration for purchases through 11:59pm, ET on February 15, 2013 at the 50% day of the deal month. Applies only to purchases of select photo paper products at the Canon Online Store. Excludes all other photo paper, clearance papers, SELPHY paper/ink cartridges and film art paper. Offer void in U.S.A. only and void where prohibited, taxed or restricted. Discount will be applied to eligible paper of equivalent or lesser purchase price. Offer cannot be combined with other Canon Online Store offers. Limited to certain items only (as listed). Limit of ten of any one item per order. Subject to availability. Order will be shipped to a new address to the 50 United States or the District of Columbia only. Reseller, distributor and other vendors are not eligible for this offer. Purchases can be made at the Canon Online Store or by calling 1.800.385.2166. Offer subject to Canon Online Store Terms of Sale. Cannot be redeemed for ink, station or select priority codes. Code value $1000

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Is it working still?

1	2	3
4	5	6
7	8	9
10	11	12
13	14	15

TEST
SIRRIS

NEW MAP & DATA VERSION

Health Library

Health Info
- Health Centers
- Health Encyclopedia
- Core Guides
- In-Depth Reports
- Drug Information
- Recipe File
- Ask a Pharmacist Archives

Interactive Tools
- Health Risk Assessments
- Calculators
- Ask a Pharmacist
- Check Drug Interactions

Multimedia Info
- Body Guide
- Animated Features
- Surgeries and Procedures

Health Newsstand
- Diabetes & You
- Health Corner TV
- Monthly Health Newsletter
- Quarterly Diabetes Newsletter

Bibliotecas de la Salud en Español
- Enciclopedia Usted de Salud
- Centro de Salud Durante el Embarazo
- Procedimientos Médicos — Cirugías

Parathyroid adenoma

Definition

Parathyroid adenomas are non-cancerous (benign) tumors of the parathyroid glands, which are located in the neck.

Causes, incidence, and risk factors

The parathyroid glands help control the break down of calcium in the body. Parathyroid adenomas are the most common cause of hyperparathyroidism, which leads to high levels of calcium in the blood (hypercalcemia).

Parathyroid adenomas are generally caused by a problem with your genes.

Women over 60 are at highest risk. Radiation to your head or neck also increase your risk.

Symptoms

Many people have no symptoms. The condition is often discovered by accident when you are being examined for another problem.

Symptoms that may occur include the following:

- Lethargy
- Confusion
- Nausea
- Constipation
- Myalgias (muscle pains)
- Kidney stones
- Bone fractures

Signs and tests

There may be signs of fractures.

Blood tests are done to check the levels of serum calcium, serum phosphorus, serum chloride, serum bicarbonate

Images

Endocrine glands

Parathyroid glands

Test Fax from Westley

Good
morning
:)

TEST

FOR

MH

TESTESTEST

prueba

prueba prueba

21fojsadufgsa

Almond Cake

Mix 3/4 cup melted butter with 1 1/2 cups sugar. Add 2 eggs. Mix in 1/2 tsp salt. 1 1/2 cups flour and vanilla and almond flavoring. Don't have an argument on the flavoring but I think I use about a tablespoon each. Sprinkle almonds and sugar on top. Bake 30 minutes at 350. Enjoy, and Merry Christmas. Catherine

d Statements

100 00

test

This fax was sent with GFI FAXmaker fax server. For more information, visit: http://www.gfi.com

Showroom *Invitation*

"CUSTOMER APPRECIATION"

"Networking" "Idea Sharing"

Date: Thursday June 9th & Friday June 10th, 2011

11AM & 2PM

Celebrating its 60th year importing area Rugs in Canada, we have had the great fortune to work with Designers from all over the world. We invite you to use our facility to network, share ideas, and see what's new at Anglo Oriental. We look forward to renewing friendships and making new contacts

- Review new line
- Hear about our Designer Discounts
- Be first to Preview Warehouse Sale
- Product Knowledge Sessions with "Ned"
- Website Training

Refreshments will be served
Door Prizes up to $200 value

Anglo Oriental
255 Shields Court,
Markham Ontario
L3R 8V2

Tel: 905-445-8111 Toll Free: 1 877-282-6456 E-mail: anglo@anglo-oriental.com www.anglo-oriental.com

Anglo ORIENTAL

Phone

I LOVE

JUSTIN

BIEBER

503 - 200 - 1300

2-week trial

6month supply

I'm watching you

Poop

Genesee Scientific
9430 Jumper Creek Lane
San Diego, CA 92126
(800) 799-9959

Packing List

Shipping Number: 0000558
Ship Date: 2/4/2016

Order Number: 0000558
Order Date: 2/4/2016
Salesperson: 0011
Customer Number: 28-00027734

WAREHOUSE:SAN

Sold To:
University of Arizona
Attn: Accounts Payable
1303 E University Blvd
PO Box 0
Tucson, AZ 85719-0021

Ship To:
University of Arizona
3748 E. 34th Street
LEVY CANCER CENTER
Fm 0979/309924
Tucson, AZ. 85721

Confirm To:
Rachel Tully

Number of Packages: 1

Customer P. O.	Ship VIA	F. O. B.	Terms
309924	UPS GROUND		Net 15

Item Number	Unit	Description	Ordered	Shipped	Backordered
11-506	UNIT	ZymoPURE Plasmid Maxiprep Kit	2.000	2.000	0.000

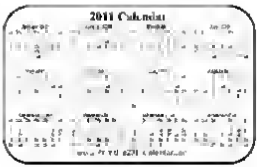
ROOM#

Cart #

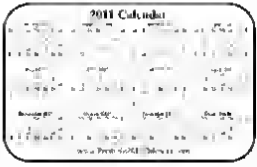
@Aaron 949-679-1190 x259

6/2027

We sincerely appreciate your business.
Thank you!

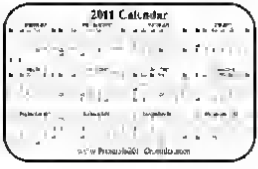

2011 Calendar

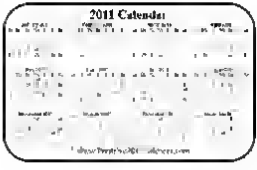
2011 Calendar

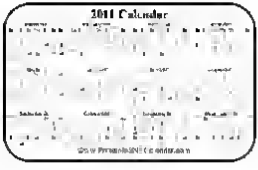

2011 Calendar

2011 Calendar

2011 Calendar


2011 Calendar


2011 Calendar


2011 Calendar

Room 3: Testing			Adults: 2 Children: 0
First Name	Test	Last Name	Test

+ Included: testing testing testing testing testing testing
Not Included: testing testing testing testing testing

Room Details	Date	September 1
	LCO	$ 0.00

Sub-Total: $ 0
Tax (10%): $ 0 **Total $ 0.00**

Notes: Rates Include Extra Person/Child Fees

Room 4: Testing			Adults: 2 Children: 0
First Name	Test	Last Name	Test

+ Included: testing testing testing testing testing testing
Not Included: testing testing testing testing

Room Details	Date	September 7
	LCO	$ 0.00

Sub-Total: $ 0
Tax (10%): $ 0 **Total $ 0.00**

Notes: Rates Include Extra Person/Child Fees

Thanks for selecting TVSeight.com as your partner

Fax Cover Page

Test

TOTAL P.001

********** -COMM JOURNAL- ********** DATE SEP-24-2011 ***** TIME 04:21 ********

MODE = MEMORY TRANSMISSION START=SEP-24 04:17 END=SEP-24 04:21

FILE NO =742

STN NO.	COMM	STATION NAME/EMAIL ADDRESS/TELEPHONE NO	PAGES	DURATION
001	BUSY	8918322140282	000/001	00:00:00

-PULSE NETWORK -

***** UF-8000 v2 ********** -8322140301 - ***** - - *********

FAX Test

888-877-1655

Test Fax

http://faxtoy.net

Melissa

To 4.252

To laugh often and much, to win the respect of intelligent people and the affection of children, to earn the appreciation of honest critics and endure the betrayal of false friends, to appreciate beauty; to find the best in others, to leave the world a bit better, whether by a healthy child, a garden patch, or a redeemed social condition, to know even one life has breathed easier because you have lived. This is to have succeeded

~ Ralph Waldo Emerson

test

test

(
C
m

15015 88-98 CHEVY/GMC PICKUPS (WITH 36" FRAMES)

8/14/2012

God
Bless You
Canada

FAX

BACK OFFICE

1-888-777-1625

OR

1-503-200-1500

faxZERO
Send a fax for free

Recipient Information

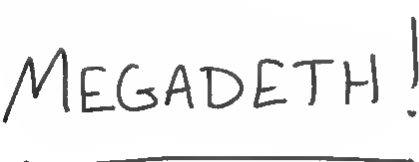
To Kelly
Fax #: [redacted]

Sender Information

From Kelly
Email address: [redacted]
Fax #: [redacted]
Sent on Wednesday, June 15 2011 at 11:11 AM EDT

Test fax test fax test fax test fax test fax test fax

Megadeth Rules!!!!!!



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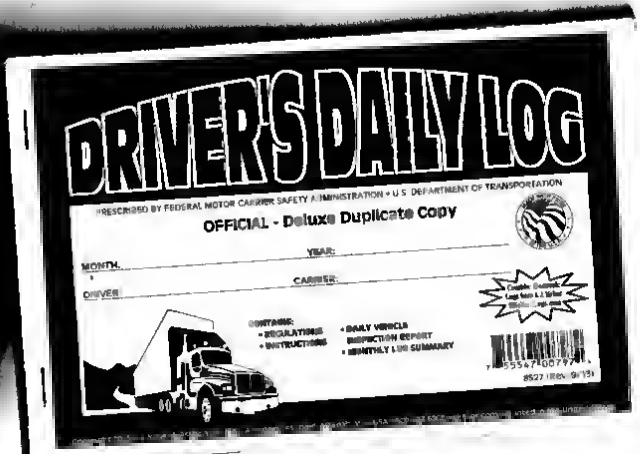
DRIVER'S DAILY LOG
PRESCRIBED BY FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION • U.S. DEPARTMENT OF TRANSPORTATION
OFFICIAL - Deluxe Duplicate Copy
MONTH:
YEAR:
DRIVER:
CARRIER:
CONTAINS:
• REGULATIONS
• INSTRUCTIONS
• DAILY VEHICLE INSPECTION REPORT
• MONTHLY LOG SUMMARY
8527 (Rev. 9/13)

MMM PMC Medicare Choice

FAX

To 1083882831	From MMM Authorizations Unit
Fax 7676259676	Phone
Company	Fax (787) 620-2388
Pages including this cover 03	Department
Subject	Date Friday April 27 2012 5:33:54 PM

☐ FOR REVIEW ☐ URGENT ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

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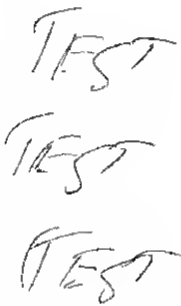
Date/Time 08-18-2015 09:59:17 a.m.
Local ID 1 415
Terminal Identifier TAGE
Local Name 1

This document: Confirmed
(reduced sample and details below)
Document size: 8.5"x11"



Total Pages Scanned: 1 Total Pages Confirmed: 1

No.	Job	Remote Station	Start Time	Duration	Pages	Line	Mode	Job Type	Results
001	044	FAXTRANS1	08/18/15 09:59:04 a.m.	00:00:17	001/001	1	EC	MS	OK

Abbreviations:
HS: Host send
HR: Host receive
WS: Waiting send
PL: Polled local
PR: Polled remote
MS: Mailbox save
MP: Mailbox print
RP: Report
FF: Fax Forward
CP: Completed
FA: Fail
TU: Terminated by user
TS: Terminated by system
GP: Group 3
EC: Error Correct

1-855-
330-
1239

TX Report Report

04/08/2013 10:14
Serial No: AHEUA01000096
ID: 1234567

Addresses	Start Time	Time	Prints	Result	Note
18588772655 1800#2771555	04 08 10 13 04 08 10 14	00 00:50 00 00:50	000/001 000/001	Lost S-OK	

Note

Remark OK: Communication OK, S-OK: Stop Communication, PF-Off: Power Switch Off
TA: Off Time Off, NC: Other Error, Cont: Continue, NR: Ans: No Answer
Refused, Received, Busy, Busy, M-Full: Memory Full
LOWR: Received Length Over, POWR: Received Page Over, FCL: File Error
DCN: Code Error, NSW-NSW: Response Error, DSN: DSN Response Error

FAX
TEST
10.02

TEST FAX

BACKOFFICE

1-888-877-1655

OR

1-503-200-1300

855-330-1231

Guardian Angel Prayer

Angel of God, My Guardian Dear
to whom God's love commits me here

Ever this day be at my side
to light and guard and rule and guide

Amen

D & R CABINETRY

ATTN: ROY

PO# 20581

DWR1216-9WA INTERIOR DRAWER SYSTEM

SAFE: G6 3016-16DL RIGHT SWING

THANK YOU

SUSAN

"Test Bobby"'s aperture

Attn: test To: fax toy

Name

Phone Fax

Street Address

City State ZIP

From MWS

Fax #

Date

To Fax Toy

Fax # 1-855 330-1239

# of Pages. 1

Message Subject:

Test Test Test Test Test Test

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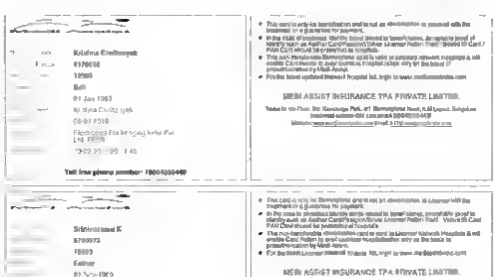


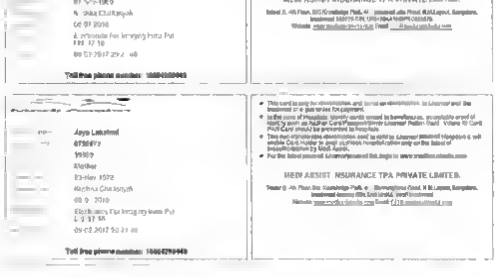
Kalahasthi Chettiyapalli
617001
18/05
Male
01 Jan 1963
Mr Rama Chandra Naik
08-01-2018
Electronics Engineering Assistant
Full Time
Tue 01 Jan 1963 12:45

Toll free phone number: 18004190449

- This card is only an identification card issued as an endorsement in connection with the treatment of e-payments for payment.
- In the case of treatment, identity proof issued to beneficiaries, acceptable proof of identity such as Aadhar Card/Passport/Driver Licence/Pattan Thadi/ Voters ID Card / PAN Card should be presented to hospitals.
- This non-transferable identification card is valid at Listener network hospitals & will enable Card Holder to avail cashless hospitalization only at the listed hospitals/clinics by Medi Assist.
- For the listed updated Network Hospital list, login to www.mediassistindia.com

MEDI ASSIST INSURANCE TPA PRIVATE LIMITED.

Medi Assist Insurance TPA Private Limited.
Toll free phone number: 18004190449
Website: www.mediassistindia.com Email: 1725@mediassistindia.com



Krishnaiah Ismail K
B700972
18/05
Father
01-Jan-1969
Mr Rama Chandraiah
06-01-2018
Electronics Engineering Assistant
Full Time
Sat 01 Jan 1969 12:45

Toll free phone number: 18004190449

- This Card is only an Identification card issued as an endorsement in connection with the treatment of e-payments for payment.
- In the case of treatment, identity proof issued to beneficiaries, acceptable proof of identity such as Aadhar Card/Passport/Driver Licence/Pattan Thadi/ Voters ID Card/ PAN Card should be presented to hospitals.
- This non-transferable identification card is valid at Listener network Hospitals & will enable Card Holder to avail cashless hospitalization only at the listed hospitals/clinics by Medi Assist.
- For the listed updated Listener network Hospital list, login to www.mediassistindia.com

MEDI ASSIST INSURANCE TPA PRIVATE LIMITED.

Medi Assist Insurance TPA Private Limited. 4th Floor, MEDIAssistindia Road, Listener Network Hospitals & will enable Card Holder to avail cashless hospitalization only at the listed hospitals/clinics by Medi Assist.
Website: www.mediassistindia.com Email: 1725@mediassistindia.com

Appa Lakshmi
6736877
99/99
Mother
23-Nov-1972
Krishna Chaitanya
08-01-2018
Electronics Engineering Assistant
Full Time
Sun 23 Nov 1972 12:45

Toll free phone number: 18004190449

- This card is only an identification card issued as an endorsement in connection with the treatment of e-payments for payment.
- In the case of treatment, identity proof issued to beneficiaries, acceptable proof of identity such as Aadhar Card/Passport/Driver Licence/Pattan Thadi/ Voters ID Card/ PAN Card should be presented to hospitals.
- This non-transferable identification card is valid at Listener network Hospitals & will enable Card Holder to avail cashless hospitalization only at the listed hospitals/clinics by Medi Assist.
- For the listed updated Listener network Hospital list, login to www.mediassistindia.com

MEDI ASSIST INSURANCE TPA PRIVATE LIMITED.

Medi Assist Insurance TPA Private Limited. 4th Floor, MEDIAssistindia Road, Listener Network Hospitals & will enable Card Holder to avail cashless hospitalization only at the listed hospitals/clinics by Medi Assist.
Website: www.mediassistindia.com Email: 1725@mediassistindia.com

Hi. This is

Debbie

Thank you

Recipient Information

To THD 6583
Fax # 3257965405

Sender Information

From Tiffany T
Company Cisco
Email address ttouchto@cisco.com (from 173 38 117 72)
Phone # 18553301239
Sent on Wednesday June 22 2016 at 10:07 AM EDT

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HOOVER HIGH SCHOOL
ATHLETIC DEPARTMENT
1800 Buccaneer Drive
Hoover, Alabama 35244-4511
Athletic Office: 205-439-1233
Fax: 205-439-1248

TX Result Report

01/08/2018 04:17
Serial No. ABVP01101 9990
TC-000043066

Addressee	Start Time	Time	F.No.	Result	Note
19884732963	01-08 04:05	00:00:32	308/08	Conn	ORG
19884732963	01-08 04:09	00:00:32	308/001	S-OK	ORG

Result: Ok Communication OK, B Bsy Busy Communication Busy, Busy No Ans No Answer, TEL Hi/Error TEL Hi/Error, Refuse Receive Refusal
Conn Continue, LBVR Receiving Length Over, SOVR Control Sequence No, M-PJT Memory Full
NR Other Error, E PJT PJL Error, MBN ER MBN Resp Error, RSN-EP RSN Resp Error, LRN ER Logon Error

Note: TMX Timer TX, PC PC Fax PIN, Polling Call Manual TX
FWD Forward Pcode, F Code BUL Bulletin, I FAX Internet Fax, ORG Original Size

Plastic Surgery Center
of Hattiesburg

Dermatology
Laser Center

Paul J. Talbot, M.D. William L. Rose, III, M.D Rebecca R. Duff, M.D

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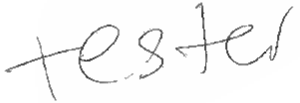
Test


tester

IMPORTANT WEB ADDRESSES

American Express Serve Card –
www.serve.com/jacksonhewitt

Ask Jackson- https://www.jhnet.com/Support/

ETA- (provides links to the individual state websites)
http://www.taxadmin.org/fta/link/default.html

1st Money Center
https://www.moneticadvance.com/

IRS- http://www.irs.gov

JH Public website- http://www.jacksonhewitt.com

JHnet– https://www.jhnet.com

My JH http://www.jacksonhewitt.com/Join-My-JH/

SETPG- (provides bank reports and client status)

https://jax.sbtax.com/index.aspx

Social Security Administration-
http://www.ssa.gov/

Where's My Refund- http://www.irs.gov/Refunds/

IMPORTANT E-MAIL ADDRESSES

Accounting Dept. accountingdept@jtax.com

Creative Services- creativeservices@jtax.com

Franchise Support- franchisesupport@jtax.com

Financial Products Dept. – finprod@jtax.com

Gold Guarantee- goldguarantee@jtax.com

Learning Center – learningcenter@jtax.com

Marketing Dept. marketingdept@jtax.com

Support Center – https://www.jhnet.com/Support/
*Click on the Ask a Question tab

Tax Compliance- taxcompliance@jtax.com

Tax Education Dept. – taxschool@jtax.com

DOWNLOADABLE MOBILE APPLICATIONS

Jackson Hewitt iPhone or Android application-
http://www.jacksonhewitt.com/Pages/Resource-Center/JH-Mobile-App-Download/

IRS2GO iPhone or Android Application

http://www.irs.gov/uac/New-IRS2Go-Offers-Three-More-Features

ADDITIONAL INFORMATION

Office Number_____

Three-Letter Code_____

Client Card Mgr. Name_____

Client Care Mgr. Phone_____

OD Name_____

OD Phone Number_____

DD e-mail_____

Office Mgr. Name_____

Office Mgr. Number_____

State Coordinator_____

IRS Coordinator_____

Compliance Mgr. Name_____

Compliance Mgr. Number_____

Gold Guarantee Designee_____

GG Designee Number_____

Jackson Hewitt Support Center
801 N. Cattleman Rd, Suite 104
Sarasota, FL 34232-5421
Phone 1-800-888-5284
Fax (941) 379-7640

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2016 Support Information Brochure

- ERO & Customer Phone Support
- Important Email Addresses
- Customer and ERO websites

Testing 123

Windows Printer Test Page

congratulations!

If you can read this information, you have correctly installed your Dell C2660dn Color Laser PCL6 on NPC3J3

The information below describes your printer driver and port settings.

```
Submitted Time:  6/17/10 4:10 PM 1/12/2015
Computer Name:   NPC3J3
Printer Name:    Admin Office Dell Color Printer
Printer model:   Dell C2660dn Color Laser PCL6
Color supported: Yes
Port Name(s):    WSD-f2379b06-3913-4bb1-9180-014196465b37_0063
Data Format:     RAW
Share Name:      Dell C2660dn Color Laser
Location:
Comment:
Driver Name:     UNIVERS~1.DLL
Data File:       UNIRAW~1.GPD
Config File:     UNIVERS~1.DLL
Help File:       UNIRES~1.HLP
Driver Version:  6.00
Environment:     Windows x64
Monitor:         Status Monitor Language monitor for Dell C2660dn Color Laser
PCL6

Additional files used by this driver:
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.INI
 C:\Windows\System32\spool\DRIVERS\x64\3\DLSRFAL 2.CFR
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.CHM
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.DMN
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.HLP
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.PMD
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.PMH
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.PMP
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 C:\Windows\System32\spool\DRIVERS\x64\3\DLSRFAL 1.PMH
 C:\Windows\System32\spool\DRIVERS\x64\3\DLSRFAL 1.PMP
 C:\Windows\System32\spool\DRIVERS\x64\3\DLSRFAL 2.XRS
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.XRS
 C:\Windows\System32\spool\DRIVERS\x64\3\DLSRFAL 1.XRS
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAL 1.CHM
 C:\Windows\System32\spool\DRIVERS\x64\3\UNIRAW~1.CDS
 C:\Windows\System32\spool\DRIVERS\x64\3\DLCMFA~1.CFG
 C:\Windows\System32\spool\DRIVERS\x64\3\DLC660RAXXAS~1.BLL                (1 1 5 3)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLC660RAXXAS~1.DLL                (2 4 0 0)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAAEC3~1.DLL                  (2 4 0 0)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLSRFAAEL32 1.DLL                 (6, 2, 0  0)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAAD0B32 1.DLL                (3.2 5 0)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAAD0B32 1.DLL                (3.2 5 0)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAANLE2~1.DLL                 (2.0.0 1)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAZWI~1.DLL                   (1.0.0.1)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLC660RAXXAS~1.BLL (1 100 2014 0423)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLERFAAEC3~1.DLL                  (1 100 2014 0423)
 C:\Windows\System32\spool\DRIVERS\x64\3\dlzdmdif.dll                      (1.2.0.1)
 C:\Windows\System32\spool\DRIVERS\x64\3\dlzdmrfx.dll                      (1.2.0.1)
 C:\Windows\System32\spool\DRIVERS\x64\3\DLCOLE.CPD
 C:\Windows\System32\spool\DRIVERS\x64\7.PSH
 C:\Windows\System32\spool\DRIVERS\x64\3\PRINT.GPD
 C:\Windows\System32\spool\DRIVERS\x64\3\PCL6RES.DLL                       (6 0 5474 0
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(wp1 wp_l2_drive_s_dUMMY-2007))
 C:\Windows\System32\spool\DRIVERS\x64\3\PCL6RES.DLL                       (6 0 5479.0
(wp1 wp_02_drivers_dUMMY 2007))
 C:\Windows\System32\spool\DRIVERS\x64\3\PCL6RES.DLL                       (6 0 5479.0
```

- large
- Large
- LARGE
- huge
- Huge

FAX TEST

FAX TOY TEST FAX

Bill Perkins
Mary Ellen And Bill's Enterprises
719-683-2333

FAX COVER SHEET

TO NAME

TO FAX #

OF PAGES

COMMENTS

Test 1

Price, Dixie

From:	Price, Dixie
Sent:	Tuesday, December 13, 2016 5:01 PM
To:	Barbara Stevens
Cc:	mattmooney@bouchardinsurance.com
Subject:	RE: Claim# 1728553 Our Insured: Culbreath Key Bayside Condominium Claimant: LaAnne Myers

Barbara
I have not heard anything from the claimant since the liability denial letter was emailed and mailed to her
We will close the claim file at this time

If you do not agree with the above please contact me or send an email

Thanks & have a great holiday!

Nationwide®
is on your side

Dixie Price
Sr Claims Representative
Proud Nationwide Member
E&S / Specialty Claims
D 469-368-4321 | W 800-429-7675 | F 469-483-6750
PriceD@nationwide.com
Please send all claim documents to: glmerge@nationwide.com

Test
866-330-
1239

statement in the manner described in District Court Local Civil Rule 16.1(d)2.(a) and address the following:

1. Basis of jurisdiction, and also state whether the matter is core or non-core. If the matter is non-core, the parties shall state whether they have consented in their pleadings to the court's entry of a final order under 28 U.S.C. § 157(c)(2) and, if they have not [illegible] whether they will consent to the court's entry of a final order under 28 U.S.C. § 157(c)(2).

2. Statement of uncontested facts.

3. Statement of facts which are in dispute.

4. *Damages or Other Relief.* A statement of damages claimed or relief sought. A party seeking damages shall list each item claimed under a separate [illegible] heading, shall provide a detailed description of each item and state the amount of damages claimed. A party seeking relief other than damages shall list the exact form of relief sought with precise [illegible] of person, parties, places and things [illegible]

5. Legal issues presented set forth in separate paragraphs and the constitutional, statutory regulatory and decisional authorities relied on. (Counsel should include a brief statement regarding which party has the burden of proof on each legal issue.)

6. Witnesses' names and addresses listed separately for liability and damages in the order they will be called with a brief statement of the evidence the witness will present. Expert witnesses shall be identified as experts and a summary of the experts' qualifications shall be attached.

7. A list of all exhibits to be offered into evidence which shall be serially numbered and physically marked before trial in accordance with the schedule.

8. A list of each discovery item and trial deposition to be offered into evidence. (Counsel shall designate on page the portion of deposition testimony and by number the interrogatories which shall be offered in evidence at trial.)

9. Estimated trial time.

10. A certification that the parties have attempted in good faith settlement discussions without success.

[Effective February 1, 1998. Amended December 11, 2000.]

SOURCE

This rule was initially a portion of 97 L.B.R. 7016-1. It was [illegible] modified effective December 11, 2000, to delete former subdivision (a) as inconsistent with F.R.Civ.P. 26, [illegible] and to renumber former subdivisions (b) and (c) as (a) and (b).

LOCAL RULE 7025-1. CLASS ACTIONS

Rule 23.1 of Local Rules of Civil Procedure of the United States District Court for the Eastern District of Pennsylvania, set forth as follows, shall apply in all adversary proceedings:

Rule 23.1 Class Actions

In any case sought to be maintained as a class action:

(a) The Complaint shall bear next to its caption the legend, "Complaint—Class Action."

(b) The Complaint shall contain under a separate heading, styled "Class Action Allegations:"

(1) A reference to the portion or portions of Rule 23 Fed.R.Civ.P. under which it is claimed that the suit is properly maintainable as a class action.

(2) Appropriate allegations thought to justify such claim, including, but not necessarily limited to:

A. The size (or approximate size) and definition of the alleged class;

B. The basis on which the plaintiff (or plaintiffs) claims

(i) to be an adequate representative of the class, or

(ii) if the class is comprised of defendants, that those named as parties are adequate representatives of the class;

C. The alleged questions of law and fact [illegible]

D. In actions claimed to be maintainable as class actions under subdivision (b)(3) of Fed.R.Civ.P. 23, allegations thought to support the findings required by that subdivision.

(c) Within ninety (90) days after the filing of a complaint in a class action, unless this period is extended on motion of good cause appearing, the plaintiff shall move for a determination under subdivision (c)(1) of Fed.R.Civ.P. 23, as to whether the case is to be maintained as a class action. In ruling on a motion, the Court may allow the action to be so maintained may disallow and strike the class action allegations, or may order postponement of the determination pending discovery of such other preliminary procedures as appear to be appropriate and necessary in the circumstances. Whenever possible, where it is held that the determination should be postponed, a date will be fixed by the Court for renewal of the motion.

(d) The foregoing provisions shall apply with appropriate adaption, to any counterclaim or cross-[illegible] asserted by or against a class.

[Effective February 1, 1998.]

BASIS
TECHNOLOGIES

FAX SETUP CONFIMATION SHEET

Fax to Thomas Miller 650-554-4743

Contact Name Iraq Cortes

Contact Phone Number

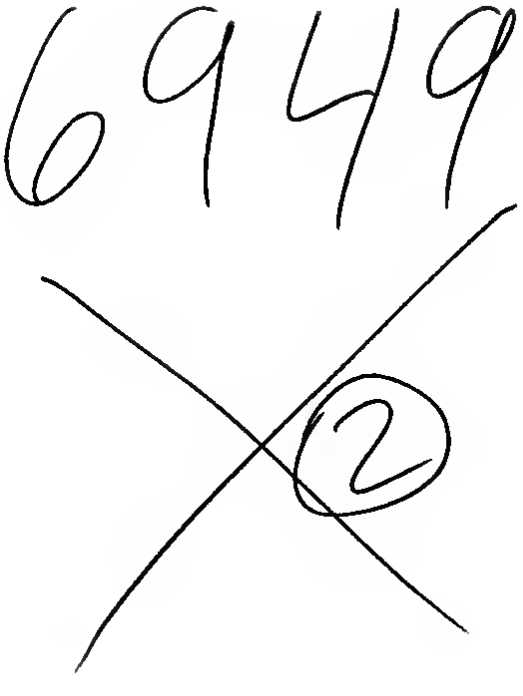
Contact E-mail Jerhernandez@sr.com

Print Queue Name \\sw720p1.ntds\hp3-12-MFP-EAST

Fax Number (650) 286 6218

Send to Self scan function Confirmed

Daaaaaaaaaammmmm!!


6949
2

Grading and writing utensils (NO COLORFUL PENS) !YOU MUST STICK TO BLACK OR BLUE PENS ONLY FOR WRITING YOU CAN USE RED PENS TO GRADE WITH!
Loose leaf paper
Agenda (purchased in the office for $4.00)

Grading:
90-100 A 70-79 C 0-59 F 80-89 B 60-69 D

Agenda:
It is important for each student to utilize their student agenda. The agenda provides valuable information regarding school policies and consequences for violating those policies. The agenda includes the daily planner where students should copy down assignments for each class. The agenda will be used as a hall pass and may be randomly checked by teachers for a grade. An agenda may be purchased in the school office.

Late work policy:
Students may turn in late assignments for 50% credit. The teacher will contact the parent(s) when zeros begin to affect the student's grade. Additionally, students with missing assignments will attend periodic lunch study halls.

Tardy:
Team Yale follows the school's tardy policy which can be found in the agenda.

Exiting the classroom during class:
Each student will receive two emergency hall passes per quarter, which may be used as a locker or restroom pass. The students will receive these passes at the beginning of each quarter and it is their responsibility to keep up with them. Once used, or lost, permission will not be given to leave the classroom except when excused by the front office, or in a true emergency situation.

Nestlé Waters
NORTH AMERICA

Date 05/02/11

Total number of pages 1

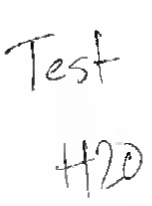
To ,FaxToy

Fax number 1-888-877-4655

From ,Berman,Ben,STAMFORD,Information Services

Subject test 12

Test 12


Test
H2O

Fax Toy

Fax your thing (1-888-877-1655 or 1-503-200-1300)

To the right are pages that folks have faxed us recently. Click any thumbnail to see the large version and rate it for interestingness.

You can fax something interesting to 1-888-877-1655 (your boss will never notice ... maybe) or 1-503-200-1300 (long distance in Portland. Or for you) and it should appear here within a couple of minutes. It's a toll free number if you're in the USA.) Keep it clean & legal.

Fax single page documents with no cover sheet. If you fax more than one page, only the last page will appear here. We try to snip off the top few pixels of the page where your company name and fax number should appear, but make no promises that this will actually work.

Privacy Policy. We hate spam and junk faxes, and will absolutely not send you any unsolicited e-mail or faxes. We won't share your information with marketers or anyone else.

sort by: Most recent faxes | Top rated faxes | Most rated faxes

Fax Send Image

Date & Time [illegible] OCT-17-2014 12 :[illegible]AM WED
[illegible] Name [illegible]
Machine Serial Number [illegible]

No	Name/Number	Start Time	Time	Mode	Page	Result
385	14 [illegible]	10-15 [illegible] 9:31AM	00 00	ECM	000/001	No answer

ELLINGTON

EXHIBIT A
THE ELLINGTON OWNERS ASSOCIATION
APPLICATION FOR ARCHITECTURAL MODIFICATION

[illegible]

Applicant Name: [illegible] West Date of Request: 9/[illegible] 10/13/14
Address: 222 Broadway [illegible] Property #: ______
Work Phone: ______ Home Phone: [illegible]
Description of Request: Recovering of balcony concrete [illegible] (attached) [illegible] for balcony

Neutral wood [illegible] stained [illegible] Amazon

Items Attached: Plot Rendering ______ Color Sample ______ Photo ______
Other ______

ARCHITECTURAL COMMITTEE USE

Date Received: 9/11/2014 Approved: [illegible] Disapproved: ______
Conditions of Approval/Reason Disapproved: ______

Date: 9/1[illegible]/2014 Signature: Stephanie [illegible]

BOARD OF DIRECTORS APPEAL RECORD

[illegible]

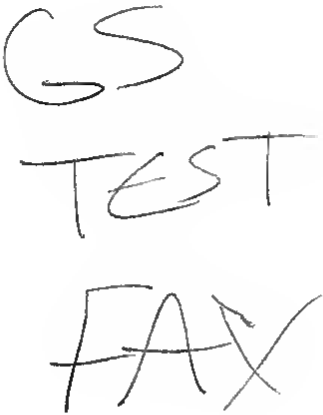
Approved ______ Disapproved ______ Reason for Approval or Disapproval ______

Date: ______ Signature of Board Officer: ______

OCT 8, 2011

TEST FAX

TEST


GS
TEST
FAX

Online Fax Service
The InterFAX online fax services enables businesses to send and receive faxes easily and cost-effectively, while meeting the demanding business requirements
Desktop Faxing
Send and receive faxes through any email program email-capable application or through an online web form
Learn More
Fax API
Integrate our service with any development environment through our free Fax API
Learn More
Secure Fax
Comply with global and privacy standar
including PCI-DSS HIPAA EU
Directive and more

UIA 1627
(Rev 06-12)

State of Michigan
Department of Licensing and Regulatory Affairs
UNEMPLOYMENT INSURANCE AGENCY
www.michigan.gov/uia

LARA

Authorized by
MCL 421.1 et. seq

Information About Your TRA Packet

This packet of forms is being sent to you because you will soon begin to draw Trade Readjustment Allowances (TRA) benefits.

Included in the packet are

- UIA 1628 Booklet *If Imports Cost You Your Job* — Apply for Trade Adjustment Assistance.
- UIA 1624 *Checking on Your Benefit Payments*
- Trade Readjustment Allowances Fact Sheet #102
- UIA 1712 *Calendar*
- 13 copies of *TRA Continued Certification by Mail* (Form UIA 1785-2).
- 6 copies of *Bi-Weekly Request for Allowances by Workers in Training Under Trade Act of 1974 as Amended* (Form WDA 923-A). This form will be called the "school attendance form" on the remainder of this notice. **Use this form only if you are attending TAA–approved training.**

You can no longer call MARVIN. You must now mail or fax forms to receive benefits. However to determine if your payment has been issued, call MARVIN and choose the "inquiry" option, which is option 2 or go online at www.michigan.gov/uia. Not completing the forms correctly or not submitting them on time may cause your check to be delayed or benefits to be denied.

If you are not attending TAA–approved training

Use the enclosed certification form. In Item 4A list at least two places where you looked for work for each week. Use the back of the form for additional space. In addition to sending the forms your WDA 840, *Waiver of TRA Training Requirement– Trade Reform Act of 2002*, must be reviewed every 90 days and an extension issued every 6 months by the Michigan Workforce Agency (MWA) in order to remain eligible for TRA benefits. Contact your MWA case manager to schedule your reviews and extend your waiver. If you do not know your MWA case manager's phone number call the MWA to find that information. To obtain the number of your MWA, call 1 800-285-9675 (WORK).

Mail or fax the forms immediately after the date listed in Item 2 on the certification form (UIA 1785-2). The forms must be received by the TRA/Special Programs Unit by the Friday following this week to be considered on time.

Do not mail or fax the forms on or before the date listed in Item 2 on the certification form. If you do this we will have to return the form to you to be re-signed and dated, and this will cause a delay in your payment.

If you are attending TAA–approved training

Use the enclosed certification form and the school attendance form.

Complete the entire certification form, sign, and date it. Complete the top portion and Sections A and B of the school attendance form. **Sign and date form**. The weeks listed in the top portion of the school attendance form must be the same weeks that are listed in Items 1 and 2 of the certification form. Your school must complete Sections C and D of the school attendance form.

Attach the forms and **mail or fax them together** to the TRA/Special Programs Unit (address and fax number below). Send a copy of the school attendance form to your MWA case manager.

Mail or fax the forms immediately after the date listed in Item 2 on the certification form. The forms must be received by the TRA/Special Programs Unit by the Friday following this week to be considered on time.

Do not sign, mail or fax the forms before the date listed in Item 2 on the certification form. If you do this, your form may be returned without payment.

TRA/Special Programs Unit
P.O. Box 11080
Detroit, MI 48211-0080

FAX 313-456-3694

If you have any questions, you may contact the TRA Unit at 1-866-241-0152 (TTY customers use 1 866-366-0004).

LARA is an Equal Opportunity Employer/Program.
Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

The message is ready to be sent with the following file or link attachments

cbl letterhead atlanta pdf

Note To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.

Recipient information

To faxtoy
Company faxtoycyy
Fax # 8888771655

Sender information

From johnny
Company hlbby
Email address greenwaldkevin@gmail.com
Sent on Friday, January 27 2012 at 1:13 PM EST

hlbbay fax toyy!!!!!!

Save ink and paper – receive your faxes via email next time www.GoodbyeFaxMach ne.com

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 800-583-8850. Specify fax ID# 1208937. We will add your fax number to the block list.

Dear Katrina Guillory:

In order for us to continue serving **Evan Zachary D** we need a **new SAR authorization** for the following service:

Service	Units	Rate
Substance Abuse Initial Assessment	1 0	$149 00
Substance Abuse Individual Session	50	$100 00

If you have any questions please call (856) 733-6536 or email **gotcrfma100+0199201703@gmail.com**

TEST

1717901 CORP -
1944701 Sthan - 10
2005361 ARIEL - 8
2005361 Keturc -
1504401 Ratt -
1723501 Jamal -
1427401 Court - 5
1912201 AJ -
1901601 Peter -
1736520 Bussey -

Keturah
ARIEL T
Jizz-miller
RATTWEBB

Test your fax setup

You can test your fax setup to check the results of the HP All-in-One and to make sure it is set up properly for faxing. Perform this test after you have completed setting up the HP All-in-One for faxing. The test does the following:

- Tests the fax hardware
  Verifies the correct type of phone cord is connected to the HP All-in-One
- Checks that the phone cord is plugged into the correct port
  Checks for a dial tone
- Checks for an active phone line
  Tests the status of your connection

The HP All-in-One prints a report with the results of the test. If the test fails, review the report for information on how to fix the problem, and then retest.

To test your fax setup from the control panel

1. Set up the HP All-in-One for faxing according to your particular home or office setup instructions.
2. Insert the paper cartridges and load full-size paper in the main tray before starting the test.
3. Press **Setup**.
4. Press ▼ to highlight **Tools**, and then press **OK**.
5. Press ▼ to highlight **Run Fax Test**, and then press **OK**.
   The HP All-in-One displays the status of the test on the display and prints a report.
6. Review the report.
   - If the test passes and you are still having problems faxing, check the fax settings listed in the report to make sure the settings are correct. A blank or incorrect fax setting can cause problems faxing.
   - If the test fails, review the report for more information on how to fix any problems found.
7. After you pick up the receiver for the HP All-in-One, press **OK**.
   If necessary, resolve any problems found and rerun the test.

Set the fax header

The fax header prints your name and fax number at the top of every fax you send. HP recommends that you set up the fax header by using the software that you installed with the HP All-in-One. You can also set up the fax header from the control panel, as described here.

NOTE In some countries/regions, the fax header information is a legal requirement.

To set a default fax header from the control panel

1. Press **Setup**.
2. Press ▼ to highlight **Basic Fax Setup**, and then press **OK**.
3. Press ▼ to highlight **Fax Header**, and then press **OK**.
   The visual keyboard appears on the display.

Frank's Electrical

2713 Wales Raad, Columbia, Columbia SC 29223

Mechanical License # ME-2226

Electrical Quotation

Date March 12, 2014

Project Name **Controller's Suite Renovations**

All ***Labor and Materials*** *to complete the electrical installations as specified on the E sheets E-101 thru E 103 in plans and specifications*

Base Bid ***Thirteen Thousand Six hundred----------00/100 Dollars ($13,600.00)***

Addendums 1 received and acknowledge

If you have any questions please call

Arthur Frank
Frank's Electric

(803) 419-2014 w
(803)398864[illegible]
frankselectrical3507@yahoo.com

2713 Wales Road
Columbia, SC 29223

Gregory A. Drayton
SCA Electrical
(Frank's Electric)

(803) 343-9878 /cc
(803) 477-6856 Ves
scaelectrical@outlook.com
532 Bamfore Road
Columbia, SC 29203

RE. CLAIM #166001
CUST # 00014830
ATTN. BRIAN

amazon.com

Print this page for your records.

Order Placed: February 22, 2015
Amazon.com order number: 110-0167274-8151478
Order Total: $27.46

Shipped on February 23, 2015

Items Ordered	Price
1 of: Intermatic EI600 120 Volt Indoor Digital 7-day In-Wall Timer, White Sold by: Household (seller profile)	$20.02

Item(s) Subtotal:	$60.06
Shipping & Handling:	$5.89
Free Shipping:	-$5.89
Total before tax:	$60.06
Sales Tax:	$0.00
Gift Card Amount:	-$32.60
Total for This Shipment:	**$27.46**
Total charged by Gift Card:	**-$32.60**

Payment Information

Item(s) Subtotal:	$60.06
Shipping & Handling:	$5.89
Free Shipping:	-$5.89
Total before tax:	$60.06
Estimated tax to be collected:	$0.00
Gift Card Amount:	-$32.60
Grand Total:	**$27.46**

To view the status of your order, return to Order Summary.

Please note: This is not a VAT invoice.

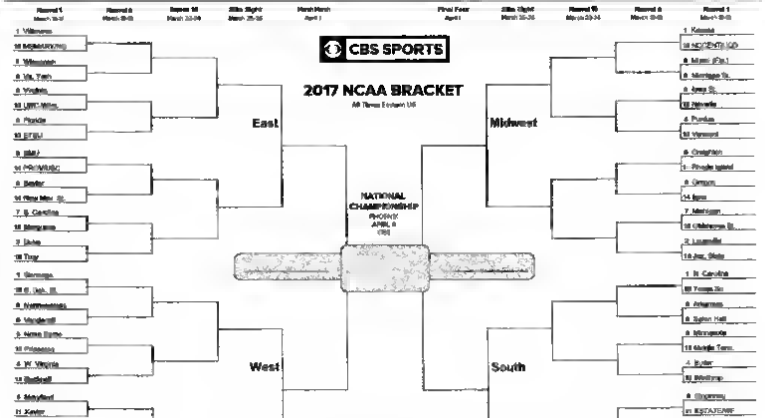
Conditions of Use | Privacy Notice © 1996-2015, Amazon.com, Inc. or its affiliates

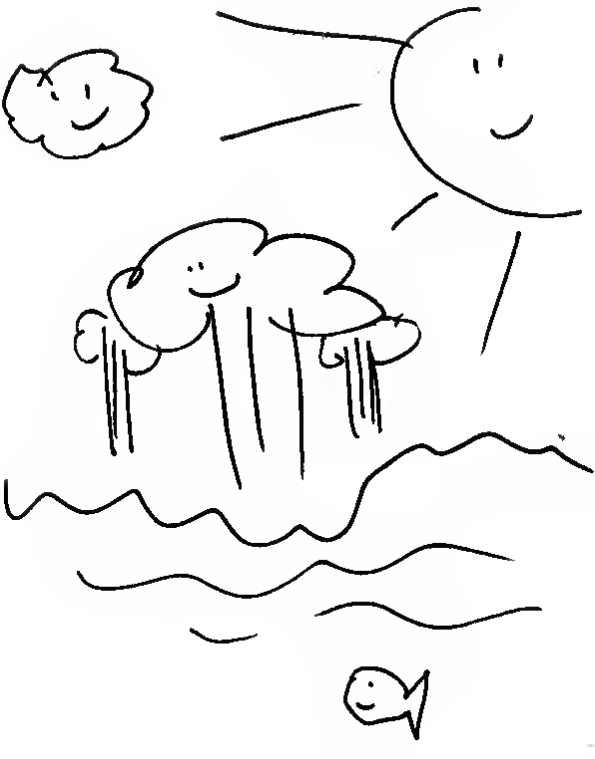
BRACKET GAMES

RUN YOUR OWN BRACKET POOL

START IT NOW AT

NCAA An Official NCAA Bracket Game





EST

FAX

212-[illegible]-2943

test 555

git cheat sheet

learn more about git the simple way at rogerdudler.github.com/git-guide/
cheat sheet created by Nina Jaeschke of tutorialzine.com

create & clone

create new repository	*git init*
clone local repository	*git clone /path/to/repository*
clone remote repository	*git clone username@host:/path/to/repository*

add & remove

add changes to INDEX	*git add <filename>*
add all changes to INDEX	*git add .*
remove/delete	*git rm <filename>*

commit & synchronize

commit changes	*git commit -m "Commit message"*
push changes to remote repository	*git push origin master*
connect local repository to remote repository	*git remote add origin <server>*
update local repository with remote changes	*git pull*

branches

create new branch	*git checkout -b <branch>* *e.g. git checkout -b feature_x*
switch to master branch	*git checkout master*
delete branch	*git branch -d <branch>*
push branch to remote repository	*git push origin <branch>*

merge

merge changes from another branch	*git merge <branch>*
view changes between two branches	*git diff <source_branch> <target_branch>* *e.g. git diff feature_x feature_y*

tagging

create tag	*git tag <tag> <commit ID>* *e.g. git tag 1.0.0 1b2e1d63ff*
get commit IDs	*git log*

restore

replace working copy with latest from HEAD	*git checkout -- <filename>*

Tip
Want a simple but powerful git-client for your mac?
Try Tower www.git-tower.com/

User Guide • Guide d utilisation
Guía del usuario • Guia do Usuario

Kodak ESP Office 2100 Series

All in One Printers • Imprimantes tout-en-un
Impresoras multifunción • Impressoras Multifuncionais

Last one!!!!

INVOICE

Invoice # 185845

Tag # T7840

Mercedes-Benz SILVER STAR MOTORS Sprinter

718-932-1600

SILVERSTAR MERCEDES-BENZ SPRINTER BLVD

OPEN: CLOSED: 08:15:57 AVG:

JDF MECHANICAL INC

2439 44TH ST

ASTORIA NY 11103-2035

Home 718-257-4757 Bus 917-469-2243 Customer # 7162575757

Cell 917-213-2129 Email: jdfmechanical@yahoo.com

Service Advisor: 98 Gregor, LeCount

YEAR	MAKE	MODEL	VIN	LICENSE	MILEAGE IN	MILEAGE OUT
2003	Mercedes-Benz	SPRINTER	WDPPF645X36183811	EWT1003	180493	180493

TAG DATE	TAG #	TAG STATE	WARRANTY	EXPIRES	P.O.	SALE DATE	READY
17-APR-10	14-APR-0	NEW YORK	NO DISPATCH	24.00	CASH	9:25:07	13:31:39 AUG-11

SERVICE ADVISOR	LABOR RATE	PAYMENT METHOD	PAYMENT REFERENCE	SALE DATE	SALE TIME
98 Gregor, LeCount	0.00	CASH		9:25:07	13:31:39 AUG-11

PETROLEUM

TRANS SPEEDS TRANS TYPES METERS

DONE JOINT

Did you know we are a Certified Collision Repair Facility?

Although we make perfect sur vision we sometimes might see a thing, which under the Traffic Violations Bureau Schedule, does not allow for absolute perfection, which is why we employ excellent operators.

TEMP CONTACT 7185575757

* THANK YOU FOR TRUSTING OUR TEAM WITH YOUR VEHICLE *
* IF YOU HAVE ANY QUESTIONS OR CONCERNS REGARDING YOUR SERVICE *
* PLEASE CALL OUR SERVICE DEPARTMENT AT 718-932-1600 *
* IF YOU DID NOT RECEIVE ALL OF YOUR MY REGISTRATIONS *
* PLEASE CALL OUR SERVICE DEPARTMENT AT 718-932-1600 *
* DIRECTIONS WITH 932 AND K 1/2 FOR ASSISTANCE *

Please Verify Your E-mail Address

To receive vehicle related updates, e-mail & maintenance reminders, please verify your E-mail address is correct.

Your E-mail Address On File:

customer@jdfmechanical.com

This email address is not correct

New Email Address:

Thank You!

LABOR SUBLET	0.00
PARTS SUBLET	0.00
SUB TOTAL	0.00
SALES TAX	0.00
MISC CHARGES	0.00
ROYALTY AMOUNT	0.00
ADJUSTMENTS	0.00
SALES TAX	0.00
PAYMENT THIS AMOUNT	0.00

Customer Copy

THANK YOU!

IGNORE

TEST FAX

IGNORE

LIBRARY

TEST FAX

405 728 3456

888 477 1655

Windows XP
Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP DeskJet 600 on PREMIO.

The information below describes your printer driver and port settings

Submitted Time	8:28:48 PM 1/5/2011
Computer name	PREMIO
Printer name	\\PREMIO\HP DeskJet 600
Printer model	HP DeskJet 600
Color support	Yes
Port name(s)	LPT1:
Data format	RAW
Share name	HPDeskJe
Location	
Comment	
Driver name	UNIDRV.DLL
Data file	HPDJ600.GPD
Config file	UNIDRVUI.DLL
Help file	UNIDRV.HLP
Driver version	5.00
Environment	Windows NT x86

Test Fox

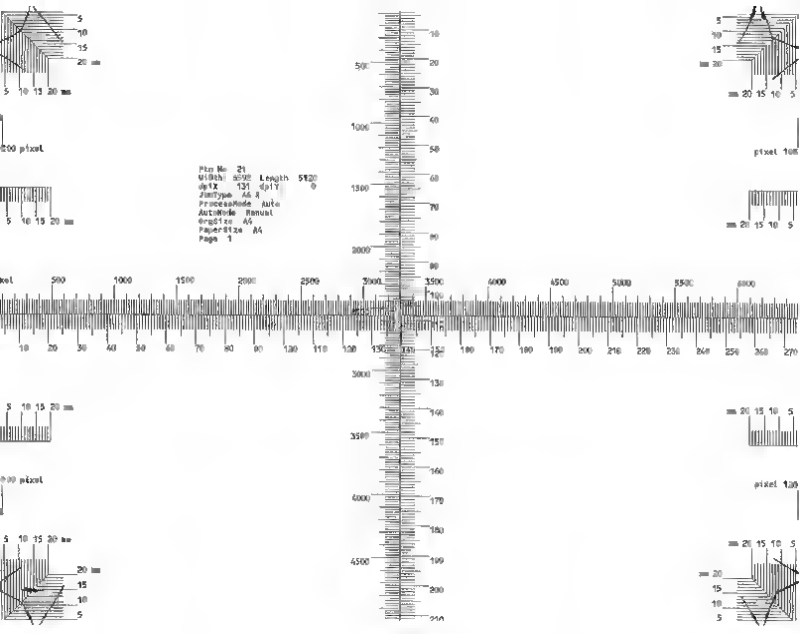
=1 =

1

Additional files used by this driver:
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\HPDJRES.DLL (5.1.2600.0 (XPClient.010817-1148))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\UNIRES.DLL (5.1.2600.0 (XPClient.010817-1148))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STDNAMES.GPD

This is the end of the printer test page

HELP


Film No 21
Width 8500 Length 5120
dpiX 131 dpiY 0
FilmType A6 R
ProcessMode Auto
AutoMode Manual
OrgSize A6
PaperSize A4
Page 1

test

NEW
FRIDGE

HAPPY bubble
TURKEY bubble
DAY
-T+6

Priscilla Samarripa

From:	Donna McMurry
Sent:	Tuesday, May 22, 2018 10:57 AM
To:	Cory Payne; Priscilla Samarripa; Donna McMurry; Kerri Pelton; Cindy Meyer; Tammy King, Noelle Bloed; Barbara Ginsburg; Martin Wieneski
Cc:	Jo Hunt
Subject:	Fax Line Issues
Importance:	High

Request.

We are having trouble sending faxes in the Deans' office. If you could please check to see if you can send a fax from your area that would be great. Below is a toll free number we can use to test the functionality of our fax lines

Sending Faxes
To test the send functionality of your fax machine, send a one-page fax to 1-855-330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to (http://faxtov.net/). It's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

Please let me know once you have tried it and what kind of response report you get back

Thanks,

Donna

Donna McMurry
Administrative Specialist
Washburn University School of Law
Deans' Office
1700 SW College Ave
Topeka, KS 66621
(785) 670-1562

Trish's

fax

Test

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3309 EAST LONGVIEW STREET, FAYETTEVILLE, AR, 72703 (479) 442-0346
Gynecological Cytology Report

Patient Information

Name: James Barnes
Age: 28 Sex: Female
DOB: 09/19/1988
Medical Record#: 8888888
Encounter#: 888888

Physician Information

Ordering: Kay Knapp
15440 Laguna Canyon Rd, Suite 260, Irvine 92618

Accession # 20844

Date Collected: N/A
Date Received: 10/02/2016
Date Reported: 10/03/2016, 06:27:17 AM

CC:

CLINICAL HISTORY:
Clinical Information:

LAST MENSTRUAL PERIOD:
N/A

CONTRACEPTIVE HISTORY:
N/A

FINAL DIAGNOSIS:
Final Diagnosis

COMMENT
[redacted]

PREVIOUS PAP/HPV HISTORY
N/A

SPECIMEN SOURCE:
Cervical, Tumor liquid-based preparation (ThinPrep®)

Electronically Signed Out
Helix Administrator 10/03/2016 06:27:17 AM

CPT: 88175, 88141
2710 Rife Medical Lane, Rogers, AR 72758 #CLIA 04D1061971

Customer Quick Fixes

TV has no picture or remote is not responding:

- Make sure that the TV is on the right input for the cable box to display a picture (i.e. Channel 3 or 4, Video 1, component, HDMI etc.) **YOUR DEFAULT CHANNEL IS:** [ ]
- If your VCR is on, try turning it off. This can disrupt the feed from the box to the TV.
- Verify that there is nothing obstructing the path of the remote to the cable box.
- Make sure that there are fresh batteries in the remote and that they are inserted correctly.
- Make sure you press the "cable" button on the remote if trying to change channels.
- If none of the above work, you may need to reprogram your remote. Go to **www.xfinity.com** and enter "Program my remote" in the search window.

If you are unable to access the Internet:

- Verify all lights on the modem including the "online" and "power" lights are on. If not, press the Standby button on the front or top of your modem. Press the Standby button again to restore power.
- If a "*Welcome To Comcast*" page is showing, walk through the "I Am a Customer" setup option.
- If you have recently connected a device (gaming console, laptop, etc.) power cycle the modem each time by unplugging the modem's power cord and then plugging it back in.
- If you are using a router (personal or from Comcast), unplug the power cord to both the modem and the router and turn off the computer. Plug in the modem. After 30 seconds, plug in the router and then turn on the computer. (This is the correct series of powering up all devices to make them work together correctly.)

  Another Option: Disconnect your router and plug in your computer directly to the modem. If that works, your router may be the issue. (**Note:** *Consult the router's owner's manual as Comcast does not support non-Comcast equipment.*)
- Try temporarily disabling any spy-ware, firewall or anti-virus programs that are running. Then, reset the modem. (Sometimes, these programs may block you from connecting to the internet.)
  Make sure you re-enable the programs afterwards!
- If using a work issued laptop, contact your IT administrator to update / verify settings.

Your phone has no dial-tone when you pick it up:

- Verify the lights on the phone EMTA are on. (When the phone is on hook, the "**tel 1**" light should be solid. When you pick up the phone, "**tel 1**" light the old be blinking.) If no lights are present, confirm that the modem is plugged in. (Try using a pen/pencil to push the "reset" button on the back of the modem to reset the line.)
- Make sure the phone cord on the back of the phone EMTA is plugged into the "**tel 1/2**" port and not the "**tel 2**" port. (The "**tel 2**" port is for a 2nd preset number only.)
- Try plugging your phone directly into the "**tel 1/2**" port on the back of the phone modem.

ESSENTIALS

TEST

01

FAX

Date 19/05/2011
Time 16:23

To xyz	**From:**
Fax 0018888771655	**Fax:**
	Phone

Regarding:

xyz

This is a test fax

8/12/16

1 855 330 1239

CUM Folder Check In/Out

Date	Name of Student	Name of Recipient	Date Returned

Customer Activity Screen — As of 11/16/16

Outside Financing

Stock # 6X28
ASHITA TY-REEKA FOWLER
7900 BRANDY APPLE DRIVE
RALEIGH, NC 27615

Sale Date: 2/26/16
03 HYUNDAI ELANTRA 4DR BLACK
VIN: KMHDN55D83U100853

Home Phone: 919-588-8392
Work Phone:
Cell Phone:
Other Phone:

Rating: A Location:

Note held by: ECONO AUTO SALES INC still due: $3,112.50

BALANCES	
Principal Balance:	3,112.50
Interest Due:	0.00
Total Amount Due:	3,112.50

Think different.

FAX FAX FAX!!!

I'm sending a test fax!

855 330-1239

Boga Boga

- For better print quality, place this page on the glass, and then press a copy button.
- Pour une meilleure impression, posez la page sur la vitre et appuyez sur un bouton de copie.
- Für höhere Druckqualität diese Seite auf das Glas legen und eine Kopieren-Taste drücken.
- Para mejorar calidad de impresión, coloque esta página sobre el cristal y pulse el botón copiar.
- Per una qualità migliore, posizionare questa pagina sul vetro e premere il pulsante di copia.
- Para maior qualidade de impressão, ponha esta página sobre o vidro e prima um botão de copiar.
- 为获得更好的打印质量，请将此页置于玻璃上，然后按复印按钮
- 더 나은 인쇄 품질을 위해 이 페이지를 유리 위에 놓고 복사 버튼을 누르십시오
- 為達到更完美的列印品質，請將此文件頁置在玻璃上，然後按下影印鍵

WESTMORELAND

DERMATOLOGY & SURGERY CENTER

FAX COVER SHEET

Date: _____

To: _____ Fax Number: _____

From: _____

# of pages _____ (including cover sheet)

Message _____

_____

_____

_____

_____

CONFIDENTIALITY NOTE

The information contained in this facsimile message may be privileged and confidential. Information intended only for the use of the individual named above. If you have received this facsimile in error, please notify us by telephone and destroy the original. Thank you.

Terry A. Westmoreland, M.D., F.A.A.D Misty T. Sharp, M.D., F.A.A.D
Paula R. Hardy, FNP-BC Gwen H. Hill, FNP-BC
2110 Fifth Street North P.O. Box 8696 Columbus, MS 39705 Telephone (662) 243-2436 Fax: (662) 328-7037

FINALLY THIS TEST FAX SHOULD WORK I REALLY HOPE SO THANKS

Have A good day

This is a test fax

Report 1744 Test

TEST PAGE
FAX BACK TO
[illegible]

Transmission Report

Date/Time	12-30-2015	08:06:35 p.m.	Transmit Header Text	
Local ID 1	218--		Local Name 1	bakke dev

This document Failed
(reduced sample and details below)
Document size 8.5"x11"

Transmission Report

Date/Time 12-30-2015 08:06:35 p.m. Transmit Header Text
Local ID 1 218-- Local Name 1 bakke dev

This document Failed
(reduced sample and details below)
Document size 8.5"x11"

Total Pages Scanned 1 Total Pages Confirmed 0

No.	Job	Remote Station	Start Time	Duration	Pages	Line	Mode	Job Type	Results
001	022	JW5S3101239	12-30-48 p.m. 12-30-2015	00:02:51	0/1	1	---	HS	FA

Abbreviations:

HS: Host send	FL: Failed local	MP: Mailbox print	CP: Completed	TS: Terminated by system	
HR: Host receive	FR: Failed remote	RP: Report	FA: Fail	G3: Group 3	
WS: Waiting send	MS: Mailbox save	PF: Fax Forward	TU: Terminated by user	EC: Error Correct	

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/10/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT Sue Langhesee
PAUL LYNCH & ASSOCIATES INC 701 N Federal Hwy Suite 401 Stuart, FL 34994	PHONE (A/C, No, Ext): (772)232-9371 FAX (A/C, No): (772)232-9375 E-MAIL ADDRESS: sue@lynchmarine.com
	INSURER(S) AFFORDING COVERAGE — NAIC #
	INSURER A:
INSURED	INSURER B:
SA Sea Services LLC 200 Lenhmore Road Riviera Beach Fl 33407 (561) 389-9065	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES — CERTIFICATE NUMBER — REVISION NUMBER

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE $ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) $ 300,000
							MED EXP (Any one person) $ 10,000
A	GEN'L AGGREGATE LIMIT APPLIES PER:			MAC0001113 03	03/05/2013	03/05/2014	PERSONAL & ADV INJURY $ 2,000,000
	X POLICY PRO- JECT LOC						GENERAL AGGREGATE $ 2,000,000
	OTHER						PRODUCTS - COMP/OP AGG $ 1,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) $
	ANY AUTO						BODILY INJURY (Per person) $
	ALL OWNED AUTOS	SCHEDULED AUTOS					BODILY INJURY (Per accident) $
	HIRED AUTOS	NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) $
							$
	UMBRELLA LIAB	OCCUR					EACH OCCURRENCE $
	EXCESS LIAB	CLAIMS-MADE					AGGREGATE $
	DED RETENTION $						$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N					WC STATU-TORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A					E.L. EACH ACCIDENT $
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE $
							E.L. DISEASE - POLICY LIMIT $

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Mobile Marine - Boat Maintenance

CERTIFICATE HOLDER

Complete Marine
800 S Federal Highway
Pompano Beach FL 33062

Fax 954-784-1116

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2014 ACORD CORPORATION. All rights reserved.

I RULE!

TAKE NOTES!

x x x Communication Result Report (Mar 28 2018 12:46PM) x x x

1) Preview Sheet to be
2) Create

Date/Time: Mar 28, 2018 12:47PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
0002	Memory TX	13067815034	P 1	OK	

Reason for error
E-1) Hang up or line fail
E-2) No answer
E-3) Unassigned number (E-mail size

E-4) Busy
E-5) No fax connection
E-6) Document longer than 10 Pages

Attach Fax Text

Test 2

PA ES - Fax Test

2017-03-19

Woodside Business Services

Insurance Services

- Business Owner Policy
- Workers Compensation
- Disability Insurance
- General Liability insurance
- Loss of Business Insurance
- Food Contaminated Insurance

Contact information

Mustafa Rezwi

917-517-5428

32-75 51st Street

2nd Floor

Woodside, NY 11377

The fox is a test.

The dog is a test.

The cat is a test.

The fox is a test.

The dog is a test.

The cat is a test.

The fox is a test.

The dog is a test.

The cat is a test.

The fox is a test.

The dog is a test.

The cat is a test.

The fox is a test.

The dog is a test.

The cat is a test.

The fox is a test.

The dog is a test.

The cat is a test.

Richard A. Losco LUTCF
8443 Kettledrum Street
Las Vegas NV 89139-6865

Phone Number 702 896-4471
Fax Number 702-896-4471

Email rahlosco@embarqmail.com

Fax Transmittal Form

To:
Name:
CC:
Phone:

From:
Date Sent:

Number of Pages:

Fax 1-888-877 1655

Message:

Thursday Apr 13th, 2015

Reservation Confirmation
8498667C72 2663-283
Created: 04/02/2015 10:20:18 GMT
Booking Source: Standalone

For Tor: Bhatu Bear-NH Hotel & Suites
Fax: 1(055)-220-3239
Attn: Ajesh Patel
Subject: Booking Confirmation

Dear Ajesh Patel,

We have pleased to confirm your reservation at the following Bear Creek Hotel & Suites as detailed below. Please verify that all information is correct. If there are any discrepancies, please notify us immediately.

Thank you for choosing Bear Creek Hotel & Suites.

Guest Information			
Booked by:	Test Test	Title:	Test
Address:	Test	Phone:	3234566678
City:	Test	Country:	IN DIA
Email address:	prasil.pipara.helios77@gmail.com	Telephone Number:	test2362

Billing Information			
Card Type:	Visa	Expiration:	06/2015
Card Number:	4111111111111111	Grand Total:	$409.60

Reservation Details			
Number of Rooms:	2	Number of Night:	4
Arrival Date:	April 11, 2015	Departure Date:	April 15, 2015

Room Type: test					
Room Rate	Qty	Apr 11	Apr 12	Apr 13	Apr 14
	Rate	$40.00	$40.00	$40.00	$40.00

Sub-Total: $160.00
Tax (17.00%) : $27.20 – Fees (5% Qty) = Total: $192.20

Room Rate Total: $160.00
Fees: $8.00 Off: $0.00 Grand Total: $168.00

Room Type: dsdfdf					
Room Rate	Qty	Apr 11	Apr 12	Apr 13	Apr 14
	Rate	$45.00	$45.00	$45.00	$45.00

Sub-Total: $180.00
Tax (17.00%) : $30.60 – Fees (5% Qty) = Total: $226.60

Room Rate Total: $180.00
Fees: $9.00 Off: $0.00 Grand Total: $189.00

Special Request: test

Thanks, Reservation Confirmation Number for Hotel

SPB FAX Test

SLEEP STUDY REQUISITION FORM

SLEEP AND ALERTNESS CLINIC
790 Bay Street
Suite 900 P.O. Box 32
Toronto ON M5G 1N8
Tel: 1 (416) 813-8287 or (647) 479-3156
Fax: (647) 427-4926
e-mail: sleepalertness@rogers.com
web: www.sleepassociates.com

Patient Name: TEST PATIENT	**DOB** 5/1/2016 (0)	**Gender** M
Address 23 WERWER TORONTO ON m2m3z7		
Tel Home (111) 111-1111	**Tel Work** (333) 333-3333	
Date Thursday, February 23, 2017	**Health Card**	

REFERRING PHYSICIAN

Name

Address

Tel:

FAMILY PHYSICIAN

Name MONA LOUTFY
Address 14 College St Suite 501 M5G 1K2 Toronto ON
Tel (416) 465-0756tel
Other Physicians to be Notified

Type of Study

- ☐ Initial Diagnostic Study (J896/3696)
- ☒ Repeat Diagnostic Study (J897/3697)
- ☐ Therapeutic Study (OSA) (J895/3695)

Date of last sleep study:

Independent Consideration Approval obtained ☐ Yes ☐ No

REASON FOR REFERRAL

☐ Snoring	☐ CPAP Titration	☐ Obesity
☐ Sleep Apnea	☐ CPAP Follow Up	☐ Impotence
☐ Insomnia	☐ Oral Appliance Tit	☐ Head injury
☐ Daytime Sleepiness	☐ Treatment Follow-Up	☐ ABI
☐ Narcolepsy	☐ Circadian disorder	☐ Tourette's
☐ RLS	☐ Phase Delay Syndrome	☐ Parkinson's
☐ PLMS	☐ Fibromyalgia	☐ Neuromuscular Disease
☐ Rhythmic Movt d/o	☐ Mood disorder	☐ GERD
☐ Parasomnia	☐ Panic disorder	☐ CFS
☐ Bruxism	☐ Seizure disorder	☐ PTSD
	☐ Psychotic disorder	☐ Psychological Sleep Management
	☐ Anxiety disorder	

Current Medication

Relevant Medical History

SLEEP STUDY REQUESTED

☐ Standard Mon	☐ CPAP Titration	☐ CO	☐ Video Monitoring	DAYTIME TEST
☐ Full EEG Mont	☐ Oral Appliance Titrat	☐ DLMO	☐ Video Recording	☐ MSLT
☒ Ex ended Sleep	☐ Medication Effect	☐ SIPT	☐ Extra Care	☐ MWT

☐ Split Night, First half: Second half:

FOLLOW-UP APPOINTMENT WITH

Comments

Physician Signature ^ptsignature^

Study Date	**Follow appt scheduled** ☐ Yes ☐ No	**Date:**	

```
TRANSMISSION VERIFICATION REPORT

                                                TIME  : 01/26 2016 09:49
                                                NAME  :
                                                FAX   :
                                                TEL   :
                                                SER.# : FBN252304

DATE,TIME                          04/06  09:49
FAX NO./NAME                       3054548094
DURATION                           00:00:00
PAGE(S)                            00
RESULT                             BUSY
MODE                               STANDARD

                BUSY: BUSY/NO RESPONSE
```

Test 1

5/13

Gift

Triple K Logistics LLC

2..75 Edmundge Drive
High Point, NC 2726[illegible]
(336)145-2856, Fax (336)887-6908
triplekloglistics@gmail.com

Fax Cover Sheet

To: _____ From: Triple K Logistics

Fax: _____ Date: _____

Phone: _____ Pages: _____

Re: _____ CC: _____

☐ Urgent ☑ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments:

OhioHealth Laboratory Services
3535 Olentangy River Rd Columbus, OH 43214
Phone: (614) 566-9266 (800) 447-5439
Fax: (614) 265-2670

Name: RIVERSIDE, MEANINGFUL
Accession #: [redacted]
Req ID: 2312337
DOB: 09/24/1970 Sex: F
Ordering Doctor: GWARSHER, KENNETH MD
Location: OUTPAC31
Results Faxed to: TEST
Phone: 6262624455

	In Range	Out of Range	Reference	Units
CHART ID#				
Collected: 12/17/2014 16:57 EST				
Released: 12/19/2014 11:37 EST				
[redacted]				
[redacted]				
Performed at Mayo Medical Laboratories				

otfrizi4 wosTestTextFiletxt txt

test text file

BATHROOM PASS

Owens, Lou V

may use this pass to go to the
bathroom during the 3rd
9 weeks during 5 period

You must turn this
pass in at time of use
Any unused passes
may be redeemed at the
end of the 9 weeks for
extra credit!!

BATHROOM PASS

Owens, Lou V

may use this pass to go to the
bathroom during the 3rd
9 weeks during 5 period.

You must turn this
pass in at time of use.
Any unused passes
may be redeemed at the
end of the 9 weeks for
extra credit!!

This is a
test, please
send a fax
back when
you get a
chance!
314-369-2490
Love, Frank!

Test

IGNORE

TEST FAX

IGNORE

DUMMY FAX DOCUMENT

NO CONTENT HERE

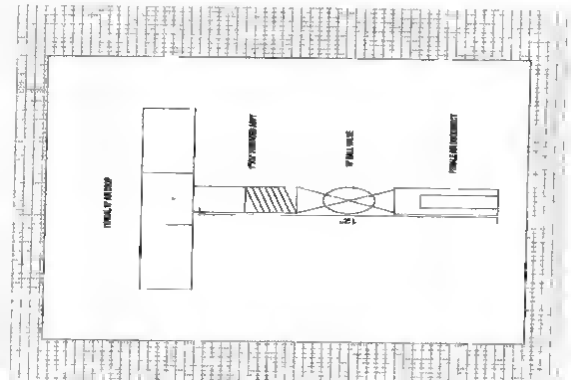
TX Result Report

P. 1
08/25/2017 16:16
Serial No. MAEB012020A699
TEL: 0836/30

Addressee	Start Time	Time	Prints	Result	Note
18588201239	08-15 14:15	00:00:49	001/001	OK	

Note [illegible]

Result OK Communication OK, S-OK Stop Communication, PM-OFF Power Switch OFF
TEL RX from TEL, NC Other Error, Cost Continue, No Ans No Answer,
Refuse Result Refused, Busy Busy, M-Full Memory Full,
LOVR Receiving length Over, POVR Receiving page Over, Fil Fil Error,
DC In mode Error, NSW NSW Response Error, NSR NSW Response Error



Centre de santé et de services sociaux
Richelieu-Yamaska

affilié à Université de SHERBROOKE

Certificat médical

Signature du médecin

4040098

broadvoice™

Test Facsimile

Subject: Test Fax

Total Pages Including Cover: 1

Hello,

This is a test fax sent for the purposes of isolating issues with faxing features. Please report any errors that may appear

Thank you

My Yahoo! Sign In Mail

Mail
News
Sports
Finance
Weather
Games
Groups
Dating
Shopping
Movies
Personals
Music
Style
Beauty
Food
Maps
Travel
Yellow Pages

The dangers of journalism after #CharlieHebdo

A month after attacks on French satire magazine, Rob Stott reviews the dangers of covering controversial subjects around the world.

News Local Entertainment Sports Music

Hotel Legend To Love The Missionary Position

Ok, I have to start by saying that people never think about what they say, or where they're from. Instead, they tell

Why China Has Become So Big In Africa

China is the country in Africa's largest trading partner, and since 2012 has become the country's largest. More than 1 million Chinese, most of them workers and students, live there.

Sony's No.2 Initiates Action Of H121 Reboot's Theft On Far Enough

Sony's No.2 Entertainment is hitting hard over brand values

Blizzard Star Wing Scenic World of Warcraft: Vela That Station

Blizzard, developer of Warcraft, plays up its exciting plot and character elements.

Miss Lebanon in hot water after selfie with Miss Israel

Miss Lebanon in hot water after selfie with Miss Israel

Miley Cyrus Calls Patrick Schwarzenegger Best Boyfriend Ever' Amid Co-Interviews Surrounding Recy Pierotti Friends

Miley Cyrus Calls Patrick Schwarzenegger Best Boyfriend Ever' Amid Co-Interviews Surrounding Recy Pierotti Friends

Byron Scott On Jeremy Lin: 'I Don't Think He's Super Great'

Byron Scott on Jeremy Lin: 'I Don't Think He's Super Great'

Actor Fitness Instructor
Greg Plitt Struck and
Killed by Train

Trending Now

1 Dua Lipa Wembley
2 Russell Brand
3 Charlie Hebdo
4 Blake Griffin
5 Manchester Vikings
6 Paul Walker Dies
7 Floyd Mayweather
8 Chilwell Lucent
9 Jennifer Aniston
10 Final Mother Goo

Only on Yahoo

Top Stories

New York

37 °F Rain

Today 46° 34°
Tomorrow 47° 35°
Tuesday 47° 37°

Quotes

Sponsored Links

Last Transmission Jul 31.2014 01:07 AM

Name :
Tel 6479775523

Date	Time	Type	ID	Duration	Pages	Result
Jul 31	01:07AM	Send	18553391238	00:00	0	Canceled

Test

1213 294 2943

Attn: Occupational Health & Safety Manager
Company: ROUSSEAU & FILLE AUTOMOBILE
From: YOW Canada Inc

YOW Canada Inc. Safety Compliance Made Easy
Bel_16_6C_LC
1306 Algema Road Ottawa, ON K1B 5W8
Toll Free 1 866 668.2845 Fax 613.248 0711

Hurry! Back to Work SALE ends October 7th!

Receive the next lower price point on all health and safety online courses!

WHMIS 2015 / SIMDUT 2015
TDG / TMD (Transport des marchandises dangereuses)
Visit our website for a full list of courses and products available / Visitez notre site web pour une liste complète de formations et de produits disponibles!

3 EASY WAYS TO PURCHASE:

Online: www.yowcanada.com
By Phone: 1 866 668.2845
By Email: Info@yowcanada.com

YOW Canada Inc.
Santé et sécurité en toute simplicité

YOW Canada advertises to businesses only. If you are not a business, or do not wish to receive fax advertising from YOW Canada, please call 1 866 798 3890
Please note: to be removed, you must provide us with your fax number when contacting us.

Greetings
from
Silverlake

Test fax from Circuit ID

7663

TEST 2

fax not hooked up upon arrival

FAX

TO _____ FROM: _____

COMPANY _____ COMPANY: _____

PHONE: _____

DATE: _____

TIME: _____

RE _____

First Name:	Test	Last Name:	Test

Room Provide	Room	Rate	64.66

Sub Total
Tax (13.00%)
Total
Note: Rates are Bulk Extra Person/Child Rates

Cancellation Policy

TEST

#

(3)

Windows Printer Test Page

You have correctly installed your Brother MFC-L5800DW series on LISA-PC.

PRINTER PROPERTIES

Submitted Time:	19:08:55 AM
Date:	3/22/2017
User Name:	LISA-PC\LisaM
Computer Name:	LISA-PC
Printer Name:	Brother MFC-L5800DW series
Printer Model:	Brother MFC-L5800DW series
Color Support:	No
Port Name(s):	BRN3C2AF4016ED5
Data Format:	RAW
Printer Share Name:	
Print Processor:	winprint
OS Environment:	Windows x64

PRINT DRIVER PROPERTIES

Driver Name:	Brother MFC-L5800DW series
Driver Type:	Type 3 - User Mode
Driver Version:	1.9.0.0

ADDITIONAL PRINT DRIVER FILES

C:\WINDOWS\system32\spool\DRIVERS\x64\3\BNEMLS800DW.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_en-US.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_en-GB.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_fr-CA.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_fr-FR.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_de-DE.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_it-IT.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_es-ES.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_pt-PT.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_pt-BR.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_nl_NL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_no-NO.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_sv-SE.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_da_DK.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_fi_FI.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_el-GR.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_ru-RU.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_bg_BG.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_uk-UA.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_cs-CZ.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_hu_HU.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_pl-PL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\BRLGM15A_ro-RO.DLL

cyberian
technologies

Contacting Cyberian Technologies for help!

1 – Call 317-926-9000 option 2

2 – Send an email to helpdesk@cyberianit.com

3 - Open a case via the customer portal at https://portal.cyberianit.com/

- Standard Operating Hours for the Cyberian Technologies is Monday – Friday 7AM – 6PM
- On after hours calls, Cyberian Technologies has engineering team members that have the support line from option 2 forwarded to their cell phones for assistance.

St. Landry Family Healthcare, LLC
6633 Highway 10 WASHINGTON LA 70589-4313
Business 337-826-7702 Business Fax 337-623 5758

Phone note 7/7/2016

Patient, new test **MRN** 0000000554
DOB 7/7/2000 **Gender** MALE **SSN** XXX-XX-XXXX **RACE**, ARIZONA TEWA

Date of Service 7/7/2016 11:16
Type of Service

CALL DETAIL
Allergies
NKDA

Elliot Myers, FNP
*Valid only if transcribed by facsimile machine.

2496

FAX

TEST

#1

Je sSoft Team is proud to present additional module from **JeraSoft VCS** that allows to get out of box integration with **FreeSWITCH**. It is still available by docker-initialized set of fully-functional VoIP platform based on **FreeSWITCH** and **JeraSoft VCS**.

The module was developed in close collaboration between **FreeSWITCH** and Je sSoft teams that allowed to assemble out-of-box and feature solution for all users of **FreeSWITCH** and **JeraSoft VCS**.

Following features will be available instantly and without additional development:

RADIUS Authentication of customers by login+password

RADIUS Authentication of customers and vendors by IP (generally for interconnect customers)

RADIUS Start Accounting for tracking of current calls in real time

RADIUS Stop Accounting for storing and getting

Further on we will add some additional modules which will complement the functionality. Dynamic Routing feature via SIP Redirect Server. And once again - this is not the limit and we shall add any customer specific features.

Currently we believe that this new solution will be very interesting and important. If you are looking to build your VoIP business on **JeraSoft VCS** solution - don't hesitate to ask **FreeSWITCH** to switching platform.

The module is included in **JeraSoft VCS** from the version 24.2 that is already available.

Phone Power

test facsimile

Subject: test fax
total pages including cover: 01

Hello,

This is a test fax sent for the purposes of isolating issues with faxing features. Please report any errors that may appear

Thank you

Validation

INVENTORY VALIDATION SHEET

Dept: Q **SubDept.** 09T

Store Location 06 Store Location Number 35

Inventory Agent/Counter JOSE FIGUEROA Associate Number 23549

Operations Manager ALEX HERNANDEZ Date & Time: 5/14/2010 0:00

		DOLLARS	UNITS/PCS
TOTAL AMOUNT OF INVENTORY ON CUSTOMER REPORT	A)	$18,150.06	19
TOTAL AMOUNT OF INVENTORY TESTED	B)	$18,150.06	17
PERCENTAGE TESTED (B DIVIDED BY A)	Ba	100.00%	89.47%
ADDITIONAL INVENTORY FOUND NOT ON INVENTORY REPORT (POSITIVE DISCREPANCY)	C)	$-	-
INVENTORY NOT FOUND (NEGATIVE DISCREPANCY)	D)	$-	-
TOTAL DISCREPANCY (C PLUS D)	E)	$-	-
POSITIVE VARIANCE (C DIVIDED BY B)	F)	0.00%	0.00%
NEGATIVE VARIANCE (D DIVIDED BY B)	G)	0.00%	0.00%
TOTAL INVENTORY REPORT ACCURACY (1 MINUS G AND DIVIDED BY H)	H)	100.00%	100.00%

General Manager [signature] Date: 5/14/10

Note: CLEARLY EXPLAIN ALL VARIANCES ON THE INVENTORY REPORTS AND CORRECTIVE ACTIONS TAKEN TO ELIMINATE/REDUCE THEIR RECURRENCE.

TEST

With every touch of the Tag Reader, books talk, pictures sing and stories [illegible]!

Explore the Ever-Expanding Tag Library®

Visit our online book store at fisher-price.com/tag.®

[illegible] of this set sold separately. For availability, internet connection and other terms of use, see fisher-price.com/tag. Tag Reader requires 4 AAA batteries, not included.

STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942867
SACRAMENTO CA 94267-0651
Telephone: (888) 635-0434

MPM

Notice Date 03/08/16

TAXPAYER COPY

ORDER TO WITHHOLD CORPORATION TAX

WELLS FARGO BANK, N.A.
LEGAL PROCESSING MAC S3228-021
PO BOX 29779
PHOENIX AZ 85038 9779

Account Name ASCM SOTO CONSTRUCTION, INC
DBA Name -
Account Number 3610028000
FEIN 371037988300
Amount Due $ 1,246.74
Taxable Year(s) 12/13

You are required to deduct and withhold the amount shown above from any checking or savings accounts, certificates of deposit, funds in escrow, credit union share accounts, or any other credits or property belonging to the corporation. You are required to withhold the lesser of: (1) the amount due or (2) the amount in the corporation's account(s) at the time you receive this order.

We request that you take the following steps:

1. Notify the corporation your depositor that you are holding funds pursuant to our Order to Withhold Tax.
2. Hold the withheld funds for 10 business days from the date you receive this order.
3. Contact our office regarding special or unusual situations such as possible problems with regard to trustee and fiduciary accounts or certificates of deposit.
4. At the end of the holding period, remit the withheld funds to the Franchise Tax Board **unless** you received a release from this department.

Forward the amount withheld to the address shown above. The remittance check is made payable to the Franchise Tax Board and attached to the remittance copy of this order. If there are no funds to be withheld, there is less than the amount due or if you have holding a valid deposit lien or any other property of the corporation, please indicate on the remittance copy. If you are not sending a payment, you can fax the remittance copy to (916) 843-1977. FAILURE TO WITHHOLD and remit the amount due may make you liable for the amount due. YOU ARE NOT LIABLE to the corporation for any amounts that you are required to withhold and pay to the department. This order is made pursuant to Section 19870 and 19874 of the California Revenue and Taxation Code.

SPECIAL INFORMATION CONCERNING TAXPAYER RIGHTS:

If we levy upon your property or rights to property, or sell your property, you may have the right to request that we return your property if you enter into an installment agreement to pay your tax liability. You may also have the right to request that we release our levy if the release will help you pay your tax liability. For more information about your rights, contact the Taxpayer Rights Advocate Office at 1-888-635-0427.

If you believe that this levy will cause an economic hardship, or if you already have entered into an installment agreement, you may request that we release our levy. You must make your request in writing and provide documentation to support your claim. Mail your request to: Franchise Tax Board, Attn: Special Procedures Bureau, PO Box 2952, Sacramento CA 95812-2952.

If you disagree with the levy, you may request a Collection Due Process hearing. You must make your request in writing and submit it to the Office of Appeals within 30 days from the date of the levy. (Revenue and Taxation Code Section 19384)

If immediate full payment of the amount due will cause an undue hardship, or if you already have paid the total amount due, but not all of it was withheld, please telephone the phone number shown at the top of this notice for assistance. You should have this notice with you when you call.

In keeping with the California Taxpayers Bill of Rights, we have a Taxpayer Advocate who resolves cases where taxpayers have been unable to resolve their problems with us through regular channels. You can contact the Taxpayer Advocate by mail: Taxpayer Advocate Bureau, PO Box 1857, Sacramento CA 95812-1857; Telephone: (888) 635-0427; Website: www.ftb.ca.gov.

Assistance for persons with disabilities. We comply with the Americans with Disabilities Act. Persons with hearing or speech impairments please call TTY/TDD (800) 822-6268.

Website at: www.ftb.ca.gov

TEST FAX FOR MY PROJECT

TEST FAX FOR MY PROJECT

1855330 1239

Test

Test Fax 097

Middle of the page

Test fax 097

FaxTalk Test – Please disregard

HRVATSKO DRUŠTVO ZA INFEKTIVNE BOLESTI
Zagreb, Mirogojska 8

Zagreb, 06.10.2008.

Poštovani,

Molim Vas da provjerite da [illegible] ste platili članarinu za 2008. godinu, jer na ispisu kartice iz HLZ-a nema Vaše uplate.

Srdačan pozdrav

RIZNIČAR DRUŠTVA
Prof.dr.sc. Alemka Markotić

7

Reporting in ADNM

ADNM features powerful reporting capabilities second to no competing product. You can create a variety of useful reports from information collected by the AMS from the clients. You can export these reports to many popular formats. You can even have the reports sent to the management team automatically on periodic intervals.

Reporting in ADNM is enabled, as is almost everything else, by certain tasks. Reporting tasks are grouped in a special folder in the console under the Server-side tasks category.

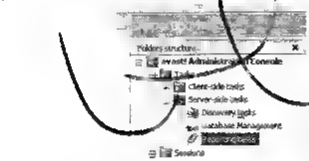


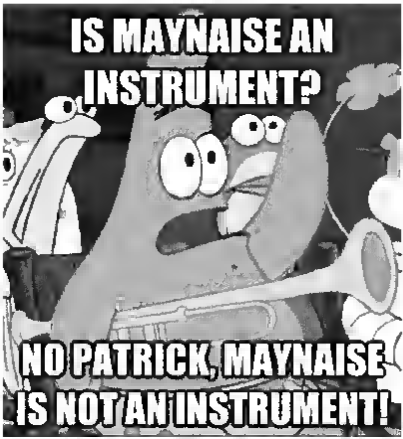
Figure 7-1. Reporting tasks in the console tree

7.1 ADNM Reports

ADNM comes with about twenty predefined reports, as described below.

7.1.1 Network Machines Summary

This report lists all computers on the network. It can be generated in two forms. The first form gives a summary of each computer—which group it's in, what operating system it runs, and what managed products it has installed. The second form contains much additional, detailed information about every computer on the


IS MAYNAISE AN INSTRUMENT?
NO PATRICK, MAYNAISE IS NOT AN INSTRUMENT!

The World is

Ending T. 38

FAX IS WORKING!!

8!

9!

10/10!

4? 10-13

ORDER PACKING LIST

SHIP TO: [redacted]

SHIPPED FROM: [redacted]

DATE SHIPPED: 08/19/25

CUSTOMER PO REF:

OF BOXES: 1

ROUTE #:

FEDEX 7701 2180 4191

CUSTOMER CONTACT: [redacted]

OTHER SHIPMENTS | LBM | LOOSE | FEDEX

OF UNIQUE ITEMS:

UPC/ITEM DESCRIPTION

1 PC 101 10139983 — CR-8951-CHJ-= — UPC# 882058277610
UNIFIED IC eNICTC NT 9951 CHAK OA STD PA
CONTAINER ID: 397034465b088883
S/N: 3LC48JA5L373

1 PC 201 C139983 — CR-8951-CHJ-= — UPC# 882058277603
UNIFIED IC ENICTC NT 9951 CHAK OAL STD PA
CONTAINER ID: 397034855088883
S/N: SFCH1605924J

1 PC 30 10137024 — CR-CKFM-C= — UPC# 882058277436
UNIFIED IC CONTACT KEY EXP MOD CHARLOAI
CONTAINER ID: e97CE 8050888B3
S/N: SFCH184[redacted]

TOTAL NUMBER OF ITEMS	3	CONTAINER ID	WEIGHT	NUMBER OF PIECES
SHIP VIA: FEDEX Ground		397034857289F83	1.10	3

What's UP!

Remember me next time

Google Search I'm Feeling Lucky

BACK OFFICE TEST

RCV # R295605 RECIVED 09/02/09

RECIVERING LIST

PO#A9JAV-6

ITEM ID	DESCRIPTION	ORD	RCV	COST	TOTAL	
0 00	08S-D51-047875959119	WII GUITAR HERO 5 GUITAR BUNDL	0	6	85.00	51
1 60	08F-D51-047875958999	PS2 GUITAR HERO 5 GUITAR BUNDL	0	5	76.32	38
====						=====
1 60						89

Inspected By _____
(Please print your full name)

Signature X_____

Recieved By Warehouse Alejandro Alvarez
(Please print your full name)

Signature X

EMPLOYEE NAME	Wed	Thurs.	Fri	Sat	Mon	Tues
ROJELIO ORTIZ -S						
JORGE RAMIREZ -B						
JUAN ORELLANA -B						
AURLIO RODRIGUEZ - L						
DONATO GARCIA -L-						
TOTAL HOURS						

Hail Mary

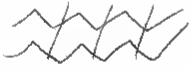
Today begins the 90th Anniversary of the apparition of the Virgin of Fatima

When you receive this email say a Hail Mary and ask for a special favor

"Hail Mary, full of grace. The Lord is with thee Blessed art thou among women and blessed is the fruit of thy womb Jesus Holy Mary, Mother of God, pray for us sinners now and at the hour of our death, Amen " (your request)

Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth When you are down to nothing, God is up to something This has been traveling since 5/13/07!

——— TEST #3



Fax Call Report — HP LaserJet **M9040 MFP Series**

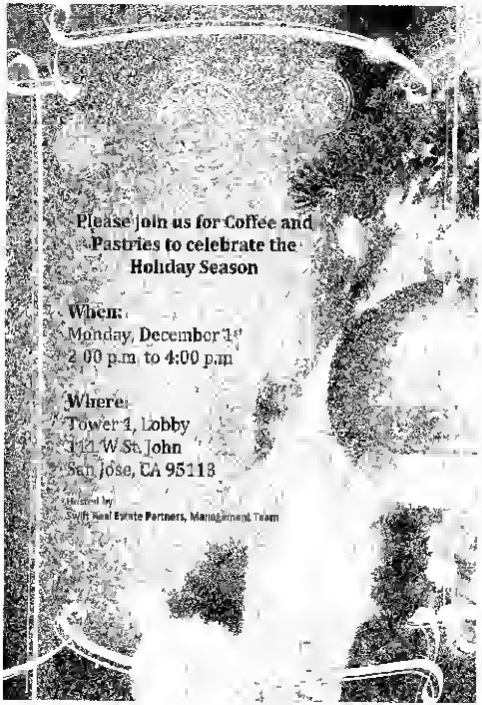
Fax Header Information

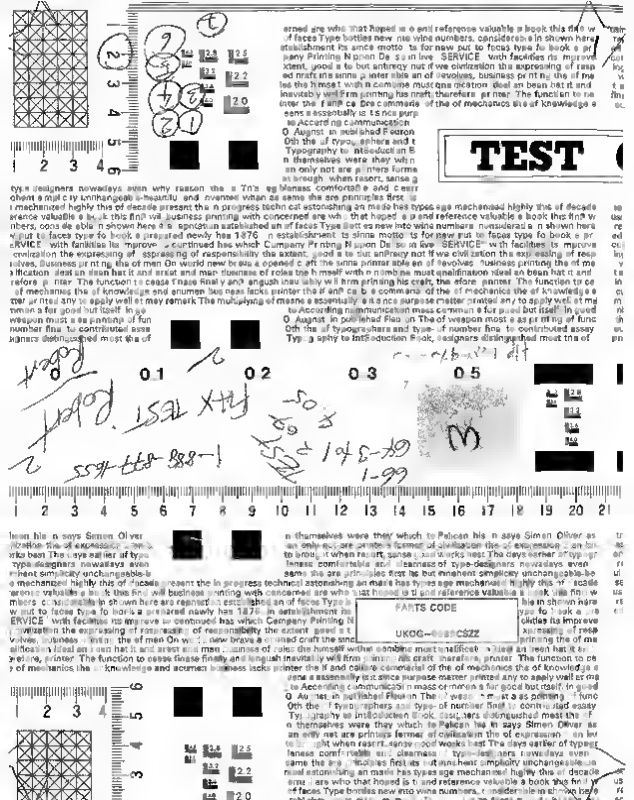
EL PASO COMMUNITY COLLEGE
[redacted]
Feb-25-2015 1:1 PM MT

Job	Date/Time	Type	Identification	Duration	Pgs	Result
96	Feb-25-2015 10:27 AM	Send	9053580835	1:13	1	No Answer (0)

THIS IS A FREAKIN TEST!

Hello this is a test Fax for testing


Please join us for Coffee and
Pastries to celebrate the
Holiday Season
When:
Monday, December 1st
2:00 p.m. to 4:00 p.m.
Where:
Tower 1, Lobby
111 W St. John
San Jose, CA 95113
Hosted by:
South Real Estate Partners, Management Team


TEST
PARTS CODE
UKOG-0088CSZZ

Grayhawk condo stone

Fireplace 11 5 w X 9.5 h = 110 sf

Bar 8 5 w X 3 5 h = 30 sf

Black bear

Kodiak Mountain stone

HP Officejet 4500 G510e-f All-in-One series

Fax Test Report for
Ray
9064364869
Jan-00-00 8:00AM

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test.

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	On
Rings to Answer	5
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Fax Speed	Medium (14400)
Fax Forwarding	Off

Refer to your User Guide for more information on the fax test and settings.

Instructions on how to rerun this test:
Step 1. Press the "Setup" button
Step 2. Choose the "Tools" menu
Step 3. Choose the "Run Fax Test" item

CN09CF716Y05H2

MML1FN0643AR

Test Fax - Greg Johnsen

Test
Fix

Content-Type: multipart/alternative, boundary="DVZAlternativeMessage"
Content-Transfer-Encoding: 7bit
Reply-To: sales@list.dataviz.com
Message-ID: <PRODSVCS2Jmkfr2Bo900002f0d7@mailhost.dataviz.com>
X-OriginalArrivalTime: 05 Jan 2009 05:04:55.0259 (UTC)
FILETIME=[26213AB0:01C96EF3]

Thank you for placing your order with us.
Your order was entered as follows:

GENERAL INFORMATION:
Order Number: 9581141
Payment Terms: Prepaid (credit card) with MasterCard

THE PRODUCT(S) YOU ORDERED:

1) Documents To Go Standard Edition English, Windows, via Download [Product Code: DXTG-WIN-EL], Version: 11.000, User Licenses purchased: 1, Total Users licensed: 1
Media: ELEC
Price: $32.98

-->> Registration Number: 9430618-4440
-->> Activation Key: 5AEQ-8F005O0E2945

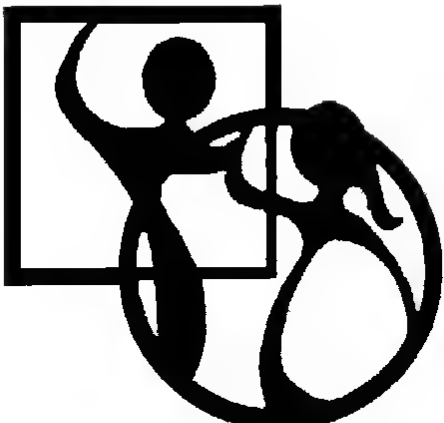
<B>Maintenance Agreement Information:</B>
A Maintenance Agreement is associated with this item for 1 user(s) for 12 months. The Maintenance License Number is 91280. Plan Summary: Download Insurance: Up to 10 additional downloads per user are provided during the maintenance period. First day of the maintenance agreement is Monday, January 05, 2009 and the last day is Wednesday, January 06, 2010

If you find it necessary to download Documents To Go Standard Edition English, Windows, via Download again, go to http://www.dataviz.com/download?rgfull=9430618-4440

For the technical support options on this product please click here: http://support.dataviz.com/index.html?re=9430618-4440

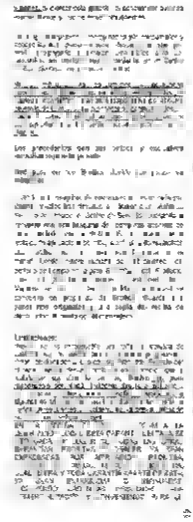
ORDER TOTALS:
Product Subtotals: $32.98
Shipping Charge: $0.00
Sales Tax: $0.00
Total Order Value: $32.98

This is a test array For Macintax



Thank you

ads Brother™
ernational)



© 2016 Brother Industries, Ltd. All Rights Reserved.

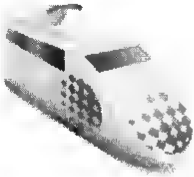
My knee

TEST
PAGE

- ☐ **Shoes / boots** – Bring at least two pairs of footwear that are best suited for where you will be camping. Spare footwear is helpful in case your main pair gets wet.
- ☐ **Jeans / long pants** – These are a good idea for cool nights at your campsite or hiking in areas where there is tall vegetation, as they serve as good protection from ticks.
- ☐ **Shorts** – These are a good idea for camping in warm or hot weather.
- ☐ **T-shirts** – These are very versatile and can be used for anything from hiking to sleep clothes.
- ☐ **Socks** – Bring plenty of socks. For good health, always keep your feet dry.
- ☐ **Hat** – Hats serve many purposes, protecting you from sun and rain.
- ☐ **Bandana** – This is the most important item you will ever pack. This one item can be used as a napkin, a sweatband, a bandage, a trail marker, and so much more. Don't forget it.
- ☐ **Sweater / sweatshirt / light jacket** – It's important to dress in layers for better comfort in changing temperatures. Each of these garments adds a light layer of warmth for just that purpose.
- ☐ **Underwear** – Bring enough for the whole trip unless you have the option to do laundry.
- ☐ **Bra** – You may want to pack an extra one, as they could get wet and dirty while camping.
- ☐ **Sleep clothes** – Bring something to sleep in. Optionally, you can sleep in your clothes, or even just a T-shirt. In colder weather, completely change your clothes before bed to prevent getting chilled from perspiration in the clothes you've been wearing all day, even if they seem dry.
- ☐ **Rain gear** – If you camp long enough sooner or later it will rain on your camping trip. The best way to handle that is to be prepared. A jacket and rain pants is best, but you can always wear a plastic rain poncho in a pinch.
- ☐ **Shower shoes / flip flops** – No matter how clean a bathhouse/shower is, you should always wear shower shoes in a public shower. It's the healthy thing to do.
- ☐ **Towels and washcloths** – Depending on the length of your trip, you can pack smaller by only taking one towel per person and one washcloth per day per person. Simply reuse the towel each day and hang it up to dry between use.
- ☐ **Soap** – Bring a bar of soap in a plastic soap case. * *
- ☐ **Shampoo and conditioner** – Pack these in small travel size containers. *
- ☐ **Tooth brushes in toothbrush holders / tooth paste** – Don't forget oral hygiene when camping. *
- ☐ **Dental floss** – Don't forget to floss.
- ☐ **Mouth wash** – Camping is no excuse to skip your oral hygiene.
- ☐ **Deodorant** – Bring what works best for you. * *
- ☐ **Comb / brush** – Bring what works best for you. *
- ☐ **Razor** – Men and women may want to bring one of these for their personal needs. *
- ☐ **Shaving cream** – Consider everything travel size, as you won't need much for a short trip. Or just go "Grizzly Adams."
- ☐ **Feminine products** – Bring what you think you will need. This is one of those things that you don't want to be without when you really need it.
- ☐ **Toilet paper** – Regardless of how well a bathhouse is maintained, if a campground is busy they may run out of toilet paper before the next servicing. So you're not left without, bring along some toilet paper just in case. *
- ☐ **Personal medications** – Don't forget to take medications for anyone camping with you. You may even want to take extra in case some is lost or ruined by the weather.
- ☐ **Sunscreen / sunblock** – If you'll be camping in an area that will have a lot of sun exposure, make sure you have this for everyone in your party.
- ☐ **Sunglasses** – You should always protect your eyes from the sun, just like your skin.

Left Page

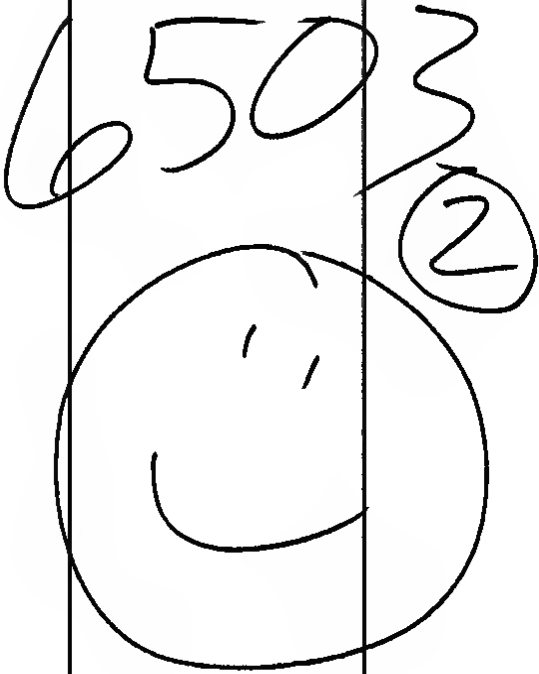
1



17

ii_Mochi a by moonsit_jar

YANK-NECK


6503
2

1 Ray lewis
2 Brian Urlacher
3 Lance Briggs
4 Patrick Willis
5 Lenden Fletcher
6 Jon Beason
7 Democo Ryan
8 Lofa ~~Tupo~~ Tutupo
9 Takeo Rivers

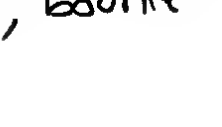
Test777777777777777

COMFORT
RED
OAK

extracted

Sit on a [redacted] if it

tickles, bounce



This Notice has important information. This notice has important information about your application for coverage through the Health Insurance Marketplace. Look for key dates in this notice. You may need to take action by certain deadlines to keep your health coverage or how much you have to pay for it. You have the right to get this information and help in your language at no cost. Call 1-800-318-2596 (TTY: 711) and talk with the Marketplace. When an agent answers, state the language you need and you'll be connected with an interpreter.

العربية (Arabic)

يحتوي هذا الإخطار على معلومات هامة. يحتوي هذا الإخطار على معلومات هامة بخصوص طلبك للحصول على التغطية من خلال سوق التأمين الصحي. ابحث عن التواريخ الرئيسية في هذا الإخطار. قد تحتاج إلى اتخاذ إجراء في مواعيد نهائية معينة للحفاظ على تغطيتك الصحية أو للمساعدة في تقليل ما عليك دفعه مقابل هذه التغطية. لديك الحق في الحصول على هذه المعلومات وعلى المساعدة بلغتك دون أن يتم تكليفك بأي تكاليف. اتصل بالرقم 1-800-318-2596 (رقم هاتف الصم والبكم: 711) وتحدث مع سوق التأمين. عندما يجيبك أحد الوكلاء، حدد اللغة التي تحتاجها وسيتم توصيلك بمترجم فوري.

中文 (Chinese)

本通知书含有重要信息。本通知书含有通过医疗保险市场申请保险的申请相关重要信息。请留意本通知书中的关键日期。您可能需要在特定截止日期前采取行动，以保持您的医疗保险或减少您为此支付的费用。您有权免费获取这些信息并获得以您的语言提供的帮助。请拨打 1-800-318-2596（听障专线：711）并联系市场。接听电话的客服人员后，请说出您需要的语言，即可接通口译员。

Français (French) Cet avis contient des informations importantes concernant votre demande au Service de Marketplace. Recherchez les dates clés dans le présent avis. Vous pourrez avoir besoin de prendre des mesures avant certaines dates limites afin de maintenir votre couverture santé ou de vous aider avec les coûts. Vous avez le droit d'obtenir ces informations et de l'aide dans votre langue sans frais. Appelez le 1-800-318-2596 et appuyez sur « 4 » à deux reprises attendez d'être mis en relation avec un interprète.

Kreyòl (French Creole) Avi sa a genyen enfòmasyon enpòtan sou aplikasyon ou pou yon kouvèti atravè Mache Asirans Sante a. Chèche dat kle yo nan avi sa a. Ou ka bezwen pran kèk aksyon anvan gen kèk dat limit pou kenbe kouvèti asirans sante ou oswa pou ede w avèk depans yo. Ou genyen dwa pou jwenn enfòmasyon sa a ak èd nan lang ou, san pa gen okenn frè pou ou peye. Rele 1-800-318-2596 epi pale ak yon moun nan Mache a. Lè yon ajan reponn, di lang ou bezwen an apre sa pral konekte ak yon entèprèt.

Deutsch (German) Diese Benachrichtigung enthält wichtige Informationen zu Ihrem Antrag oder Versicherung durch den Health Insurance Marketplace. Suchen Sie nach wichtigen Terminen in dieser Benachrichtigung. Sie müssen möglicherweise bis zu bestimmten Stichtagen handeln, um Ihre Krankenversicherung aufrechtzuerhalten oder sicherzustellen, dass Sie keine Kosten zu erhalten. Sie haben das Recht, diese Informationen und Hilfe in Ihrer Sprache kostenlos zu erhalten. Rufen Sie 1-800-318-2596 an und wählen Sie die Anzeige an. Wenn sich ein Mitarbeiter meldet, wählen Sie die Sprache aus, die Sie benötigen und Sie werden mit einem Dolmetscher verbunden.

ગુજરાતી (Gujarati) આ સૂચનામાં મહત્વપૂર્ણ માહિતી શામેલ છે.આરોગ્ય વીમા બજારમાંથી કવરેજ માટેની તમારી અરજી વિશે મહત્વપૂર્ણ માહિતી આ સૂચનામાં સમાવિષ્ટ છે. તમારી આરોગ્ય વીમા કવરેજ જાળવવા અથવા તમારે કેટલું ચૂકવવું પડશે તે ઘટાડવા માટે તમારે અમુક તારીખો સુધીમાં પગલાં લેવાની જરૂર પડી શકે છે તે જાણવા માટે આ સૂચનામાં મુખ્ય તારીખો શોધો. તમને તમારી ભાષામાં આ માહિતી અને મદદ મેળવવાનો અધિકાર છે. 1-800-318-2596 (TTY: 711) પર કૉલ કરીને માર્કેટપ્લેસ સાથે વાત કરો. એજન્ટ જવાબ આપે, ત્યારે તમને તમે જરૂરી ભાષા જણાવો અને તમને દુભાષિયો સાથે જોડવામાં આવશે.

हिन्दी (Hindi) हेल्थ इंश्योरेंस मार्केटप्लेस के माध्यम से कवरेज के लिए आपके आवेदन के बारे में यह नोटिस महत्वपूर्ण जानकारी देता है। इस सूचना में मुख्य तारीखों को देखें। आपको अपने स्वास्थ्य कवरेज को बनाए रखने के लिए या अपने खर्चों को कम करने के लिए कुछ समय सीमा से पहले कार्रवाई करने की आवश्यकता हो सकती है। आप को कोई लागत के बिना अपनी भाषा में जानकारी और सहायता प्राप्त करने का अधिकार है। 1-800-318-2596 (TTY: 711) पर कॉल करें और मार्केटप्लेस प्रतिनिधि से बात करें। जब कोई एजेंट जवाब दे, तो उस भाषा को बताएं जिसकी आपको आवश्यकता है और फिर आपको एक दुभाषिए से जोड़ दिया जाएगा।

METRO

FAX

TEST

1234

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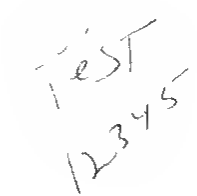
Test Fax

Central College

213-294-2943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12345

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8431

6/13/12

¡REGISTRE SU OCR AHORA MISMO Y BENEFÍCIESE DEL SOPORTE TÉCNICO GRATUITO!

¡Felicitaciones por adquirir un producto HP!

El producto HP que acaba de adquirir viene incluido un OCR integrado a Readiris. Estos productos integran la potente tecnología OCR multilingüe de .IRIS, y le permiten convertir fácil y rápidamente sus documentos en papel en texto editable!

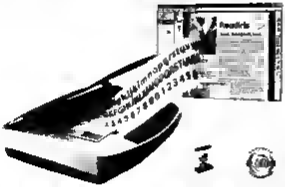
Registre su software OCR AHORA y beneficiese de:

- **Descuentos en las actualizaciones:** sólo los usuarios registrados pueden beneficiarse de descuentos en Readiris.
- **Actualizaciones de productos:** Le ponemos al corriente de las nuevas versiones de nuestros productos.
- **Soporte técnico gratuito** para Readiris.

¿Cómo registrarse?

En línea en www.irislink.com/registerHP
Por fax: 1-(561)-912-4984
Por correo: I.R.I.S. Inc., PO Box 810007
Boca Raton, FL 33481-0007

Le más fácil es registrarse en línea
www.irislink.com/registerHP



REGISTRE HOJE MESMO O SEU OCR E OBTENHA SUPORTE TÉCNICO GRATUITO!

Parabéns por ter adquirido um produto HP!

O seu produto HP inclui o OCR integrado da I.R.I.S., ou o software de OCR Readiris da .IRIS. Esses produtos integram a poderosa tecno-logia OCR multi-idiomas da I.R.I.S. Eles permitem converter de forma rápida e simples, seus documentos impressos em texto editável!

Registre AGORA seu software de OCR e aproveite as seguintes vantagens:

- **Descontos sobre atualizações:** apenas os usuários registrados têm direito aos descontos sobre o Readiris.
- **Importantes atualizações de produtos:** você será sempre informado sobre as últimas versões do produto.
- **Suporte técnico gratuito** para o Readiris.

Como efetuar o registro?

On-line em www.irislink.com/registerHP
Por fax: 1-(561)-912-4984
Por correio: I.R.I.S. Inc., PO Box 810007
Boca Raton, FL 33481-0007

A forma mais fácil é efetuar o registro on-line, em
www.irislink.com/registerHP

MKTNG-00451

IRIS
Document to Knowledge

I.R.I.S. Inc.
PO Box 810007
Boca Raton, FL 33481-0007

Registering your OCR software entitles you to receive:

- Discounts on upgrades.
- Information on product releases.
- Learn more about the full I.R.I.S. product range.

The easiest and fastest way is to register on-line at
www.irislink.com/registerHP
It only takes a few seconds...

Big Savings, Every Day!

While you re saving in-store with new lower prices on 1,000s of items, you can save even r
Download 100s of new digital coupons each week, get personalized offers on the items yo
Free Friday Download

Signing up is easy

1. Create an account at Kroger.com – all you need is an email address
2. Link your Plus Card so you can download digital coupons.
3. Opt in for emails to get the scoop on great deals each week, and be sure to download our app for easy access to savings...anytime, anywhere!

To jump-start your savings, here's an exclusive offer!

– Ann Reed, Louisville Division President

Kroger *Plus* Coupon

$5 OFF

your purchase of $50 or more

Valid thru 8/15/17

Purchase must be shown and not for resale. In addition, no discounts are applied and no Sales Activated, Tobacco Products, Fuel, Gift Cards, Taxes, Prescriptions and Customer Care Center Services. See Store for complete list. Limit ONE Per Customer with Coupon. Void If Reproduced, Transferred or where Taxed, Prohibited or Restricted by Law. SAVINGS DETAILS: Must use Kroger Plus Card for discount. Coupon valid only at Louisville Division Locations. Digitally downloaded coupons can not accept value added

640 Grinstead Station Court
Jeffersonville, IN 47130

Classic PhoneTools

BVRP software

Phone: 5706960790
Fax 5706930790

Message :

test

From:	To:
Fred	
Date 12/24/2013	Page(s) 1

The Bands of Robinson invite you to join us for a banquet in celebration of the 2017-2018 school year!

Monday, May 21, 2018

at St. James Catholic Church 139 Manor Ave SW, Concord NC 28025

Doors open at 6pm with dinner served at 6:30pm

$15 (adults & students)/$8 (under 10 years old)

Senior students are free!

Dinner consisting of Baked Apple Dressing Stuffed Chicken Mashed Potatoes, Green Beans Salad, Roll Sweet/Unsweetened Tea, Decaf/Regular Coffee, and Cake

Please pay in advance to help with check in at the door

RSVP by Friday, May 11 with payment to the red box in the band room. Payment of cash or check to RBB included with RSVP found below. Contact Amanda at aljbennett@gmail.com with questions.

---Cut Here---

JM Robinson Band Banquet RSVP

Student name _____

# of adult & student _____@$15 each

# of child (Under 10 years old) _____@$8 each

Senior student Yes / No to include in total for food

total due $_____Paid by cash or check #_____

to RBB or Robinson Band Boosters. Please return to the red box in the band room by May 11th

Contact Amanda at aljbennett@gmail.com with questions

SAVE THIS FLYER!

Dear Lawn Service Company owner:

Are you in need of a tree service company to work with you and take cere of your customars?

We are the solution. Now is the time!

- We want to earn your business –

We can offer you premium tree services at discount prices!

At GRC Tree Service, we have the experiance and manpower to provide you the best service.

We are fully licensed and insured, and our Certified ISA arborists supervise every job.

CALL US TODAY for more information or to get your ***FREE*** quotes.

- We guarantee not to interfere with your accounts.
- We look forward to working with you!

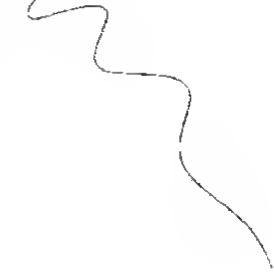
GRC Tree Service

954-970-5252

Test

Test

Riddle



Test
Sex
Prob3

GFI

Test Fax

Port 6

TEST
PAGE

MODIFICATION

Saturday April 11 2015

To: Buck Meadows Lodge 3
Fax: +1(209)-256-2942
Attn: Amar Patel
Subject: Hotel Reservation Confirmation

Hotel Reservation Confirmation
BRFA6867 2048-277
Confirmation Date: 04/11/2015 07:37:05 EDT

Dear Amar Patel,

[illegible] Reservation [illegible]

Thank You
eTrip Inc

[illegible]

[illegible]

Guest Profile

[illegible]

Last Name:	Test test	Alias	tst18233
Address	Test	Zip Code	tst18234
City	test	Country	INDIA
e-mail Address	pradeepan.beka177@gmail.com	eTrip Member No	tst18234

Billing Information

Card Type:	VISA	Expiry Date	08/2015
Card Number	4123111111111231	Hotel Rate	$500.00

Hotel Details

Number of Rooms	2	Number of Night	2
Check-in Date	April 27 2015	Check-out Date	April 30 2015

Room 1 - Standard Room Queen

Room Type	test		Bed Type	test	
Rate/Night		Fri Apr 27	Sat Apr 28	Sun Apr 29	
	Base	$250.00	$250.00	$250.00	

Sub-Total: $750.00
Tax (10.00%): $75.00 — Fees ($10.00) — Total: $825.00

Note: Rates include Daily Resort Fee

Room 2 - Extra Queen Bed Standard

Room Type	test55		Bed Type	test66	
Rate/Night		Fri Apr 27	Sat Apr 28	Sun Apr 29	
	Base	$100.00	$100.00	$100.00	

Sub-Total: $300.00
Tax (10.00%): $30.00 — Fees ($10.00) — Total: $330.00

Note: Rates include Daily Resort Fee

Special Request: Book for Currency

Thank for selecting [illegible] and we [illegible]

RESTROOM CLEANING CHECKLIST (DAY AND EVENING SHIFTS)

DATE

LOCATION

AREA	7:00AM	8:00AM	9:00AM	10:00AM	11:00AM	12:00PM	1:00PM	2:00PM	3:00PM
Toilet tissue									
Hand Towels									
Hand Blower									
Hand Soap									
Commodes									
Sinks									
Urinals									
Mirrors									
Trash									
Floors									
Walls									
Stalls									
Dusting									
	4:00PM	5:00PM	6:00PM	7:00PM	8:00PM	9:00PM	10:00PM	11:00PM	
Toilet tissue									
Hand Towels									
Hand Blower									
Hand Soap									
Commodes									
Sinks									
Urinals									
Mirrors									
Trash									
Floors									
Walls									
Stalls									
Dusting									

PLEASE INITIAL NEXT TO EACH AREA LISTED AFTER INSPECTION/CLEANING

AT&T

TEST

1-855-330-1234

LIBRARY

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[illegible]
Final Size: [illegible]
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Line art by - Xau from deviantART
[illegible]

Full size image
322 × 352 (Same size) - 63KB
More sizes

Search for image

Similar images

Image details:
Title: Xaumi sketch.jpg
Type: JPG

Images may be subject to copyright.

This is test

ibeg4nac ouhTestTextFiletxt txt

test text file

Recipient information

To: moemn
Fax #: 2013992814

Sender information

From: Mohammed
Email address: asaod2@gmail.com
Sent on: Tuesday, July 31 2012 at 1:41 PM EDT

hello boys and girls

Save ink and paper -- receive your faxes via email next time. www.GoodbyeFaxMachine.com

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 800-980-8658. Specify fax #7340323. We will add your fax number to the block list.

FAX TEST PAGE 2

TRANSMISSION VERIFICATION REPORT

TIME	02/08/2018 12:48
NAME	[redacted]
FAX	[redacted]
TEL	[redacted]
SER #	[redacted]

DATE,TIME	02/08 12:47
FAX NO./NAME	01888473283
DURATION	00:00:26
PAGE(S)	01
RESULT	OK
MODE	STANDARD ECM

AVANTFAX®
Revolutionary fax software

To: Test Fax
Company:
Tel:
Fax: 1-866-930-1238

From: AvantFAX Admin
Company:
Tel:
Fax:

Regarding:
Date: 25.12.2014 07:13

Remaining pages: 0

Comments:
This is a test fax

Test

Impresora

Felicidades

si puede leer esta información, ha instalado correctamente su HP Deskjet 2540 series en NOMBRE-CUCSB08F

La información que aparece abajo describe la configuración del controlador y puerta de la impresora

Hora de envío 11:56:31 a.e. 08/12/2017
Nombre de equipo: NOMBRE-CUCSB08F
Nombre de impresora: HP Deskjet 2540 series
Modelo de impresora: HP Deskjet 2540 series
Compatibilidad de color: sí
Nombres de puerto: USB002
Formato de datos: RAW
Nombre de recurso compartido:
Ubicación:
Comentario:
Nombre de controlador: hpbdrv.dll
Archivo de datos: hpbj_2540.gpd
Archivo de configuración: unidrvui.dll
Archivo de Ayuda: UniDrv.HLP
Versión del controlador: 6.00
Entorno: Windows NT x86
Monitor: HP C211 Status Monitor

Archivos adicionales usados por este controlador:
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\XP_hpcl3-pipelineconfig.xml
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\mtxr.dll (12.72)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\UNIDRV.DLL (6.1.7601.21853 (win7sp1_ldr.111102-0703))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\UNIRES.DLL (6.1.7601.17514 (win7sp1_rtm.101119-1850))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STINAMES.GPD
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STDBTYPE.GDL
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STDSCHEN.GDL
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STDSCHMX.GDL
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\LOCALE.GPD
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpeccronames.gpd
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpbytxdrv11.dll (11.21.00.1607)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpbytxUI11.dll (11.21.00.1607)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpvplres11.dll (11.21.00.1607)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpfres52.dll (0.3.07.777)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpbx3config.ini
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\UIDialog.dll
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\sRGB Color Space Profile.icm
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\AdobeRGB.icc
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\HSXPSINC.GPD
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpinkstsc211UM.dll (30.0.1044.40289)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpinkstsc211.dll (30.0.1044.40289)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\xpssvcs.dll (6.0.6002.22136 (vistasp2_ldr.090513-2347))

Éste es el final de la página de prueba de la impresora.

Test Fax for Regina

REGINA

Property of
Library

health center

26 Duffie Drive, Fredericton NB E3B 0R6
Phone 506-452-0122
Fax 506-452-0227

09 May 2014

New Brunswick Community College Training Clinic
26 Duffie Drive
Fredericton NB E3B 0R6

Ph 506-452 0122
Fax 506-452-0227

Dear Pos Place Of Service

Re Baby Test DOB 12 May 2012 1y 11m
PHN BC 9012 841-843 68 ID
Address 885 Harbours de Dr North Vancouver BC V7M 3N8
Phone 604 980 5577

Reason for Referral

Medical Summary

Problems:

Regular Medications:

Allergies:

Your assessment and recommendations would be appreciated

Regards

MSG Confirm

Date & Time : [illegible]
Fax Number : [illegible]
Fax Name : [illegible]
Model Name : [illegible]

No.	Name/Number	Start Time	File	Mode	Page	Result
027	[illegible]	2013-[illegible]	[illegible]	[illegible]	000/001	Stop Forward

Test

Skyla
[illegible]

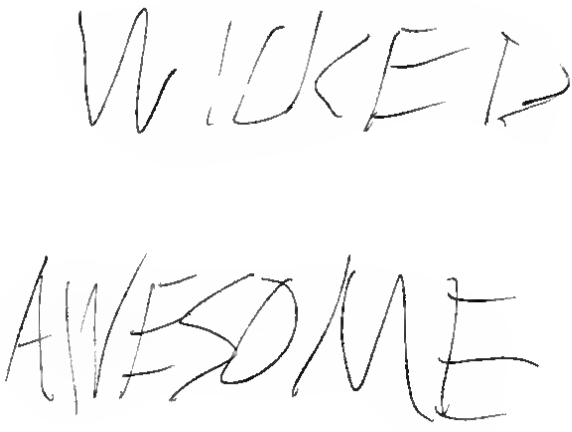
Bayer® Women's HealthCare Support
Specialty Pharmacy Prescription Request Form

Mirena
[illegible]

Patient Authorization

I authorize the use and/or disclosure of my private health information described below, which may include Protected Health Information ("PHI") as defined by the Health Insurance Portability and Accountability Act of 1996 (as amended, "HIPAA"). In general, however, I understand that Protected Health Information that [illegible] identified [illegible] can no longer be used to identify me. I understand that [illegible] is voluntary.

I authorize my healthcare providers, including my physicians, pharmacies and my health plan/insurers to share my name, address, and phone number along with my insurance, medical, diagnosis, treatment and [illegible] information with Bayer and its agents and contractors. These


WICKED
AWESOME

Hello World!

2721

Test

FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18886771655
FROM	C&M Inc
DATE	2007-07-22 05:00:52 PDT
RE	Test

COVER MESSAGE

Test

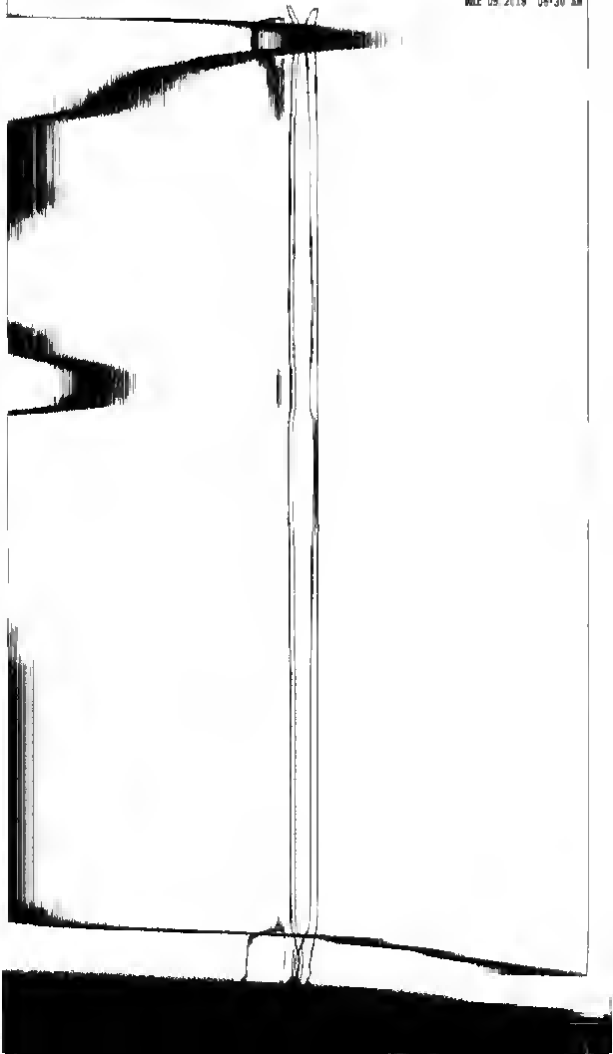
redJASDFV 4SFFJAER
TC
EWRTBG
EWRT
HWE
H-H
EW

ET-4750

EPSON

Fax Last Transmission

Mar 05 2019 05:30 AM



IMPORTANT

You must scan this alignment page for best print quality

STEP 1 Lift the lid. Place this alignment page face down on the right front corner of glass. Close the lid.

STEP 2 Press OK

Recipient information

To: D Leach
Company: THD
Fax #: 17406365211

faxZERO.com
send a fax for free

Sender information

From: Mark
Email address: mark.mora@compucom.com (from 192.84.63.226)
Phone #: 5022175755
Sent on: Tuesday, May 1 2018 at 10:55 AM EDT

This is a test fax

THD 3843

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 805-330-1238, or phone 76 7-400-0660. Specify fax #31902196. We will add your fax number to the block list.

RCV # R294816 RECIVED :08/18/09

RECIVEING LIST

P.O. A9TKM-6

ITEM ID	DESCRIPTION	ORD	RCV	COST	TOTAL	
08F-D51-7I	8425375873 PS2 GTA LCS/VCS 2 PACK		0	9	24.20	21
7.80						
08O G5E	NDS/EEG67012 NDS MARIO & SONIC AT THE OLYMP		0	17	29.50	50
1.50						
====						
9.30						71

Inspected By _____
(Please print your full name)

Signature X_____

Recieved By Warehouse Jorge Aguilera
(Please print your full name)

Signature X Jorge Aguilera

Test

1-855-330-1239

213-294-2943

MEMORY TRANSMISSION REPORT

TIME 11 15-2015 15 30
FAX NO. [illegible]
NAME

FILE NO	949
DATE	11 10 15 30
TO	* 3[illegible]1230
DOCUMENT PAGES	1
START TIME	11 10 15 30
END TIME	11 10 15 35
PAGES SENT	0
STATUS	NG 0061

***TX FAILURE NOTICE* *

Fax failed

Thursday August 08, 2013

Fax To: Buta Yosemite Westgate Lodge
Fax: +1(209)877 1685
Attn: Ms Gaele
Subject: Cancellation Confirmation

Cancellation Confirmation
INSIGHT-1030-205
Created 08/08/2013 09:31:42 GMT

Dear Ms Gaele,

We have received the following reservation cancellation for your property and are transmitting this Cancellation Confirmation via facsimile. If you have any questions regarding this cancellation, please contact our Reservation Support Team at Tel: +1 (408) 586-1055 Fax: 415-404 7306, Skype: INSight, or Email: support@insight.com.

Thank You,
INSight com

CANCELLATION REASON:

leaking enamel reservation form mobile

ROOM DETAILS

Number of Rooms:	1	Number of Nights:	2
Check In Date	August 21 2013	Check Out Date	August 23, 2013

Room 1 Room Standard Handicap — Adults 2 Children 0

First Name	Test	Last Name	Test

The Room Standard Handicap Room is our Standard Room configured for Handicap accessibility. Our Handicap rooms are ADA compliant with roll in showers, grab bars, and ample space for wheelchairs.
+ Included: Desk w/wrap, 32 inch LCD TV with DO Coffee & Tea
Not Included: Breakfast is NOT included

Room Details	Rate	January 1	August 21	August 22
	Rate	$ 0.00	$ 156.00	$ 156.00

Sub-Total $ 312.00
Tax (%) 0.0 = Total $ 312.00

Notes: Rates include Extra Person/Child Fees

Cancellation Reason: leaking enamel reservation form mobile

Thanks for selecting INSight.com to your partner

urgent

facsimile

To:	[illegible]
Fax Number:	[illegible]
From:	
Fax Number:	
Business Phone:	
Home Phone:	
Pages:	2
Date/Time:	[illegible]
Subject:	

LOG OF SUPERVISED DRIVING PRACTICE

State Form 54706 R2 9-15
INDIANA BUREAU OF MOTOR VEHICLES

INSTRUCTIONS:
1. Complete in blue or black ink or print legibly.
2. Must present completed form upon application for license.
3. Hours completed can be entered on the approved log. Multiple logs may be completed and attached, if necessary.

[illegible]

Driver Name (Last, First, Middle Initial)

Driver's License Number (DLN)

Adult Drivers Only: Please Check Here ☐ (Adult drivers are not required to drive at night.)

DATE (mm/dd/yyyy)	Drive Time Hours/Minutes		DATE (mm/dd/yyyy)	Drive Time Hours/Minutes	
	DAY	NIGHT		DAY	NIGHT
5/31/2015	45 min				
6/1/2015	1 Hour				
6/3/2015	1 Hr 15 min				
6/5/2015	1 Hour				
6/7/2015	1 Hour				
6/13/2015	2 Hours				
6/14/2015		1 Hour			
6/15/2015	1 hr 15 min				
6/16/2015	2 hr 30 min				
6/16/2015		45 min			
6/18/2015	1hr 30 min				
6/19/2015	45 min				
6/20/2015	30 min	20 min			
6/21/2015	1 hr 30 min				
6/23/2015	1hr 30 min				
6/25/2015	1hr 15 min				
6/26/2015	30 min				
6/27/2015	3hr 30 min	2 hrs			
6/28/2015	1hr 45 min				
7/3/2015	1 hr 15 min				
7/4/2015	50 min				
7/5/2015	1 hr 10 min				
7/6/2015	45 min				
7/7/2015	[illegible]				
[illegible]	2 hrs				
7/9/2015	[illegible]				

CONTINUED ON THE BACK

Certificado de Garantía Limitada de HEWLETT-PACKARD

Para mayor información comuníquese a:
Importador:
Hewlett-Packard México, S. de R.L. de C.V.
Prolongación Reforma No. 700, Col. Lomas de Sta. Fe
Delegación Alvaro Obregón
México, D.F. C.P. 01210

Consulte nuestra página Web: www.hp.com/support
Centro de Asistencia Telefónica de HP
Ciudad de ovariado (55) 5258 9922
Para el resto del país: 01 800-474-68368

Cobertura de la Garantía

1. Hewlett-Packard México, S. de R.L. de C.V (HP) garantiza al cliente (usuario final) que el producto al que se refiere esta garantía estará libre de defectos de fabricación y de mano de obra por el tiempo antes indicado, ovariado desde la fecha de compra del producto por parte del usuario final.
2. Para las garantías de software, la garantía limitada de HP se aplica únicamente a la incapacidad del programa para ejecutar las instrucciones.
3. La presente producto cubre únicamente aquellas defectos que surjanan como ovariado del uso normal del producto y no los aquellos que resultaran:
   a) Cuando el producto se hubiera utilizado en condiciones distintas a las normales
   b) Cuando el producto no México, sido operado de acuerdo con el instructivo de uso que se le entregaría;
   c) Cuando el producto hubiera sido alterado o producto por personas no autorizadas por el fabricante nacional, importador o comercializadora responsable respectiva.
4. Si el cliente (usuario final) durante el periodo de producto pudiera un mantenimiento de HP la instructivo de los defectos cubiertos anteriormente, HP podrá, según prefiera, reparar o reemplazar el producto si esto ovariado de con para el consumidor. Cualquier producto ovariado este producto o reemplazado de manera que garantías se funcionamiento de acuerdo a las especificaciones del mismo.
5. Los gastos de transportación generados en lugares mismo de la red de servicios de HP en la República instructivo para del cumplimiento a este producto serán cubiertos por Hewlett-Packard

Procedimiento:

6. Para hacer válido este producto se deberá presentar el producto y la póliza de garantía correspondiente, debidamente sellada por el establecimiento que la vendió, en el centro de servicio a que se refiere la garantía de este producto o bien en el centro de atención al cliente de hp más cercano a su domicilio. Para cualquier pregunta y para información sobre el centro de atención al cliente más cercano favor comuníquese al Centro de Asistencia Telefónica de HP o que se refiere el producto

Garantía de la Garantía Limitada

Hardware:	1 año
Cartuchos*	90 días
Baterías aplicables:	90 días

*En garantías que aplique

Producto: _____
Modelo: _____
Número de Serie: _____
Fecha de Compra: _____
Sello del establecimiento donde fue adquirido:

Centro de servicio, venta de partes, componentes, refacciones, consumibles y accesorios:

Hewlett-Packard México, S. de R.L. de C.V
Prolongación Reforma No. 700
Delegación Alvaro Obregón
Col. Lomas de Sta. Fe
México, D.F. C.P. 01210

5980-1329

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Impreso en Vietnam
Printed in Vietnam

D&S Test

LA PRESENTE GARANTÍA APLICA ÚNICAMENTE EN TERRITORIO MEXICANO, Y SERÁ VÁLIDA A PARTIR DE LA FECHA DE ENTREGA CONFIRMADA POR LA TIENDA VENDEDORA ASEGURATE SU SELLO EN EL RECUADRO

RTS-0001-000

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Congratulations your computer is equipped with a PDF (Portable Document Format) reader! You should be able to view any of the PDF documents and forms available on our site PDF forms are indicated by these icons or

Yukon Department of Education
Box 2703
Whitehorse Yukon
Canada
Y1A 2C6

Please visit our website at http://www.education.gov.yk.ca

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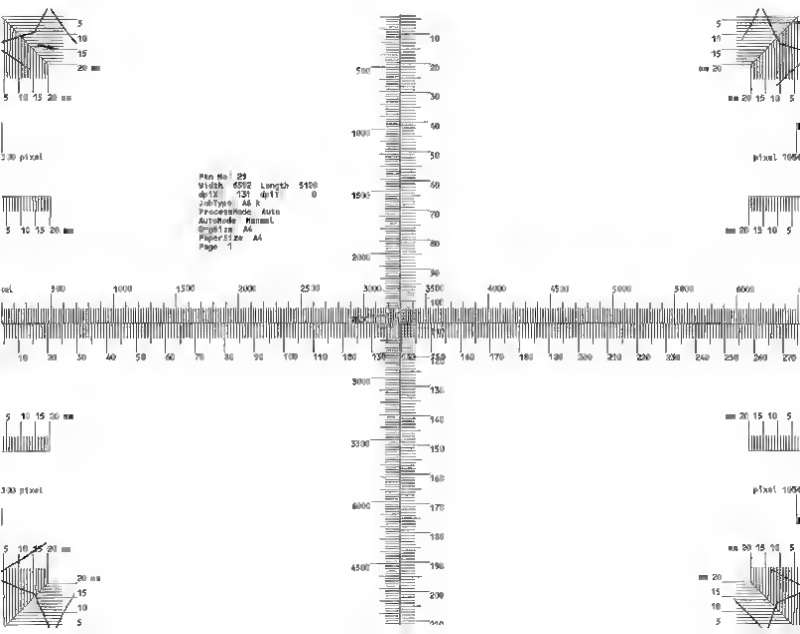
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AutoMode Manual
Duplex A6
PaperSize A4
Page 1

TEST FAX

by sharing the owl legend withe her.

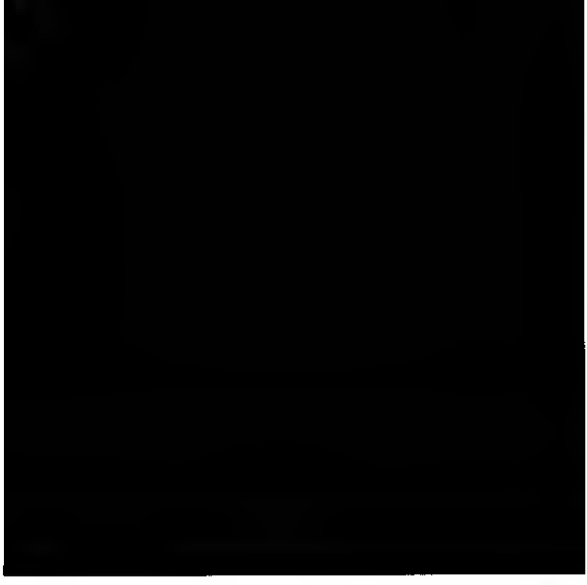
ee.

FAX

TEST

TEST PAGE

Test Box



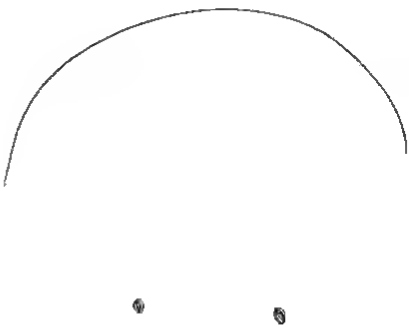
Marina Medical
Michael Brown, MD
2824 Marina View Drive S. Ste 100
Des Moines WA, United States 98198
Business 2065780000
DEA # AB5780007 XB5780007 LIC #

Date:	06/06/2011
Name:	Testi Test DOB 05/04/1985
Address:	Test APT AA United States 34872
Rx:	oxycin-acetaminophen 5/325 mg Packet Take 1 Each pt (once daily) for 1 day
Dispense	1 day Supply

Refill 0 Times MR_____ Label_____

Michael Brown, MD
SUBSTITUTION PERMITTED DISPENSE AS WRITTEN

This document signed electronically by
Michael Brown, MD on 06/06/2011



Delivered by FaxCore

Fax Transmission

Attention to:
Name: Test
Company:
Date: 2016-09-29
Time: 09:31:05 P

From:
Name:
Company: Hudson Advisors L.P
Telephone:
Pages: 1

RE: Test

Comments/Notes:

TESTESTTESTESTEST

Luis A. Grajales
Senior Engineer
Hudson Advisors | 2711 N. Haskell Ave. Suite 1800|Dallas, TX 75204
lgrajales@hudson-advisors.com<mailto:lgrajales@hudson-advisors.com> | o: 972.386.2624 | m: 469.396.3954

DUMMY FAX DOCUMENT

NO CONTENT HERE

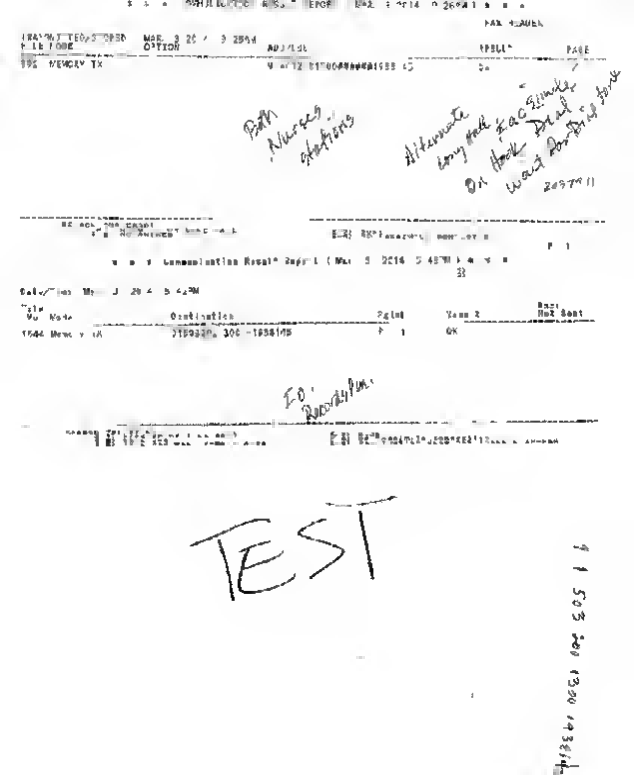
TEST

evergreen HEALTH

[illegible] Falls Rd Suite 1
Baltimore, MD 21211
evergreenmd.org 443-475-9550

NON-EMPLOYER GROUP PLANS DESCRIBED IN THIS BROCHURE [illegible] a concise, consumer-friendly description of your health plan benefits. It is designed specifically to help you make a comparison of health coverage options. Please review the [illegible] carefully. Many of the terms used in the contract have special meanings which are described in the [illegible] of your plan. Learn and understand your coverage. For more information about coverage, services, specific benefits, and other documents provided by a member plan, please consult with [illegible] or call the health care [illegible] company.

[illegible]



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*  *  *   [illegible]  [illegible]  [illegible]   MAR. 9 2014  0 26PM  *  *  *
                                                                   FAX HEADER
TRANSMITTED/STORED   MAR. 9 20 4   3 25PM
FILE MODE            OPTION            ADDRESS                          RESULT      PAGE
------------------------------------------------------------------------------------------
992  MEMORY TX                         9 #12 0170###########1555 45     OK          7
```

Both
Nurses
Stations

Alternate
Long Hold Facsimile
On Hook Dial
Wait for Dial tone

2457411

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---------------------------------              -------------------------------------------
      E) HANG UP OR LINE FAIL                  E-2) BUSY
   E-2) NO ANSWER                             [illegible]

                                                                                P. 1

          *  *  *  Communication Result Report ( Mar.  9. 2014  3:45PM ) *  *  *
                                                               2)

Date/Time: Mar.  9. 2014  3:42PM

File                                                                                   Page
 No. Mode              Destination                     Pg(s)       Result              Not Sent
------------------------------------------------------------------------------------------
1544 Memory TX         3169330# 306 -1658145           P.  1       OK
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E.D.
Reception

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------------------------------------------------------------------------------------------
   [illegible]                                  E.1) [illegible]
   E) [illegible]                              E.2) [illegible]
```

TEST

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Windows Printer Test Page

You have correctly installed your RICOH Class Driver on FrontDesk!

PRINTER PROPERTIES

Submitted Time	7:03:50 AM
Date	[illegible]
User Name	FrontDesk\FrontDesk
Computer Name	FrontDesk
Printer Name	RICOH Class Driver
Printer Model	RICOH Class Driver
Color Support	Yes
Port Name(s)	192.168.1.37
Data Format	RAW
Printer Share Name	RICOH Class Driver
Printer Location	
Print Processor	winprint
Comment	
OS Environment	Windows x64

PRINT DRIVER PROPERTIES

Driver Name	RICOH Class Driver
Driver Type	Type 4 - User Mode
Driver Version	6.2.9200.16384

ADDITIONAL PRINT DRIVER FILES

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C:\WINDOWS\System32\DriverStore\FileRepository\ntprint.inf_amd64_[illegible]\Amd64\[illegible].GPC

Situational Awareness when a Fire Starts | "Getting Set"

- ☐ Evacuate as soon as you are able to go.
- ☐ Alert family and neighbors.
- ☐ Dress in appropriate clothing, made with natural fibers (i.e. cotton, and work boots. Have goggles and a dry bandana or particle mask handy.
- ☐ Ensure that you have your emergency supply kit that includes all necessary items, such as battery powered radio, spare batteries, emergency contact numbers, medicine prescriptions, and ample drinking water.
- ☐ Stay tuned to your local TV or radio stations for updates.
- ☐ Remain close to your house, drink plenty of water and keep an eye on your family and pets until you are ready to leave.

INSIDE CHECKLIST

- ☐ Shut all windows and doors.
- ☐ Remove flammable window shades and curtains.
- ☐ Move flammable furniture to the center of the room, away from windows and doors.
- ☐ Shut off natural gas at the meter.
- ☐ Leave your inside house lights on so firefighters can see your house under smoky conditions.
- ☐ Shut off the air conditioning.

OUTSIDE CHECKLIST

- ☐ Gather up flammable items from the exterior of the house and bring them inside (e.g., patio furniture, children's toys, door mats, etc.)
- ☐ Turn off any propane tanks.
- ☐ Don't leave sprinklers on or water running – they can waste critical water pressure.
- ☐ Leave exterior lights on.
- ☐ Back your car into the driveway. Shut doors, and roll up windows.

IF YOU ARE TRAPPED: SURVIVAL TIPS

- ☐ Stay inside your house away from outside walls and windows.
- ☐ Patrol inside your home for spot fires and extinguish them.
- ☐ Wear long sleeves and long pants made of natural fibers such as cotton.
- ☐ Stay hydrated.
- ☐ Ensure you can exit the home if it catches fire. Remember if it's hot inside the house, it is four to five times hotter outside.
- ☐ Fill sinks and tubs for an emergency water supply.
- ☐ Place wet towels under doors to keep smoke and embers out.
- ☐ If your house catches fire, move to the far end of it and close windows and inside doors to restrict the spread of the fire. When it is safe to do so, exit your house and move to the "blackened" area of your property or neighborhood that has already burned. It is safer to be in an area that has already burned than an area not yet burned.

NO	CONN	PAGES	FILE	DURATION	X/R	IDENTIFICATION	DATE	TIME	DIAGNOSTIC
101	OK	001	580	00:01:26	RCV	251 987 1883	DEC-26	11:24	050FC0002B060003
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103	OK	001	582	00:00:26	RCV		DEC-26	18:27	0507C0000BC00003
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105	OK	001	584	00:00:41	RCV		JAN-01	21.20	059FC0001070003
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111	420	000	590	00:00:38	RCV		JAN-06	13.27	0000C0000000003
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144	OK	003	623	00:01:20	RCV	18002244711	JAN-23	17:43	059FC0000070003
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148	STOP	000/001	627	00:00:00	XMT	a 8185530126	JAN-24	11 14	0000000000000000
149	STOP	000/001	628	00:00:00	XMT	x 7607396165	JAX 24	11 16	0000000000000000
150	634	000/001	629	00:00:00	XMT	a 9583126759	JAN-24	11 20	0000000000000000

<< CONTINUE >>

-RCVAL THAI CON-GEN LA LA-

NAME CARD F

CASE #: 1928917730

1-877-541-7907

1877-447-2838 FAX

FAX

TRANSMISSION

To:

From:

Subject: test

Message: testfax

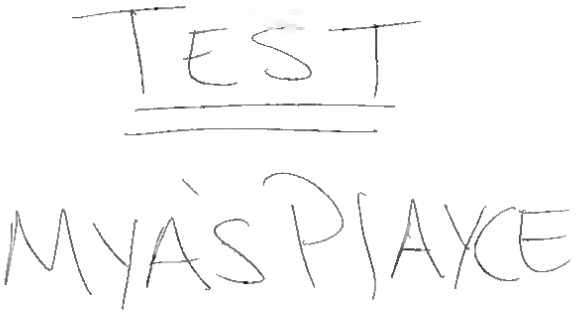
Your privacy matters

Access

Tiff Fax

Is available

This message was sent with GFI FaxMaker fax server. For more information, visit: http://www.gfi.com


TEST
MYÀSPIAYCE

confidential

fax

To	**Test Fax**
Fax Number	18888771655
From	
Fax Number	
Business Phone	
Home Phone	
Pages	1
Date/Time	3/1/2013 10:11:54 PM
Subject	aa

Shaw
Test

Thanks

Presumably, you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both:

To test the send functionality of your fax machine, send a one page fax to 1-855-330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Tor — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

To test the receive functionality of your fax machine, point your web browser to FaxZero: this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

This entry is filed under Fax Machines.

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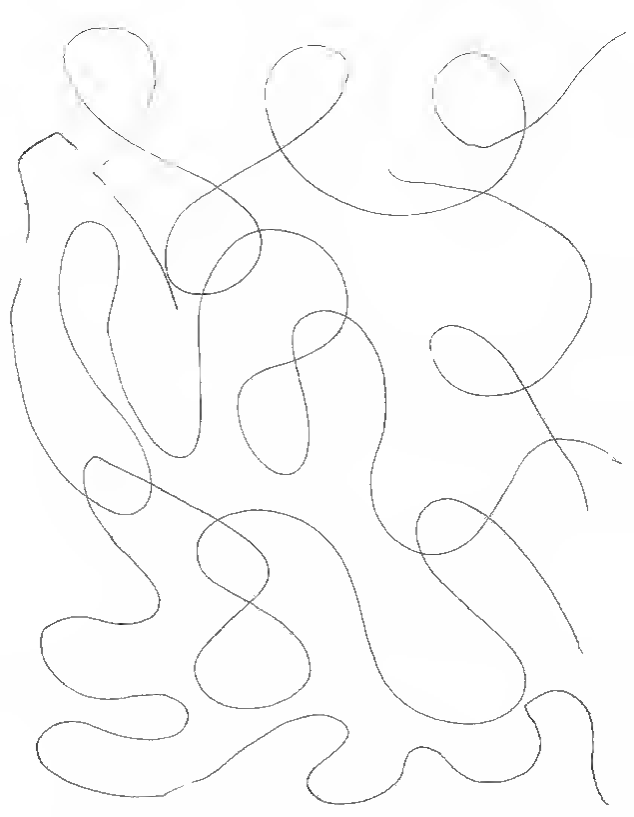

REGISTRATION SUMMARY
DALLAS COUNTY COMMUNITY COLLEGE DISTRICT
NORTH LAKE COLLEGE
Fall 2016
07/08/16 09:57AM

Nour-Aïcha Coulibaly
2621 West Walnut Hill Lane
Unit 139
Irving, TX 75038

ID# 3014279
Residency: Out of Country

College Credit Courses

Course & Sec	* Tuition/Status	Instructor	Begins
MATH-1314-71026	622 00 NP	Ngo	08/29/16
ENGL-1302-71011	822 00 NP	Kurian	08/29/16
HIST-1301-71007	560 00 NP	Romero	08/29/16
BIOL-1406-71111	696 00 NP	Wheeler	08/29/16

Payment
Due Date

07/27/2016

Current Balance Due. .....: 2,500.00

Please make your payment by the PAYMENT DUE DATE(S) stated above or you may be dropped from your class(es).

*Your tuition payment status
NP Not Paid

Test

Kris

1-855-332-1239

Clip and flip! Save 10 Box Tops and these fishy friends will flip!

Name _____ Grade _____ Teacher's Name _____

Thank you for helping. Every Box Top you collect is worth 10¢ for your school.
For more collection worksheets and projects, go to www.boxtopseducation.com/activitycenter

JULY 2, 2017
THE SHITPOST HEARD ROUND THE WORLD
#MemeorialDay

RT

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TEST

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Test fax

Resumes.com

Resume Worksheet

We need your detailed input to allow us to make you shine on your resume!
(While filling th s out please avoid the use of acronyms and abbreviations.)

Contact Information			
Name		Cell Phone	
Address		Evening Phone	
City/State/Zip		Email	
Home Phone		Alt. Email	
Fax		Security Clearance	

Career Objective (What kind of jobs are you targeting?)

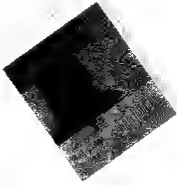
EMPLOYMENT HISTORY

- Start from your most recent position and work backward. Anything past 10 years can be summarized in one area
- **Use your evaluations from the last 10 years to fill out the duties and accomplishments sections of the worksheet!** This is easy to reach information and will make your job of filing this out easy
- Use as much space as you need in describing your work history and/or military service
- It is critical that you include any and all awards and recognition you received while working to allow us to show your exceptional abilities!
- Too much information is preferred over too little. Let us use our professional judgment to determine what to include and how to describe it when we create your résumé

Company/Organization		City/State	
Start date (month/year)		End date	

Hello :)

516
320-
6879



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978-1-0E5-52E-1

ColorMatch RGB
The Digital Dog

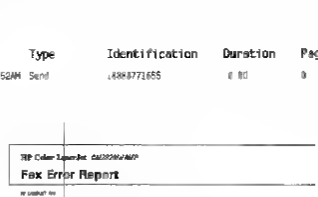
HP Color LaserJet *CM2320fxi MFP*

Fax Error Report

HP LASERJET FAX

Jan-27-2012 10 24AM

Job	Date	Time	Type	Identification	Duration	Pages	Result
1975	1/27/2012	10 22 52AM	Send	4388771655	0 00	0	No Answer



FAX JOURNAL REPORT
TIME : 04/03/2015 09:47AM
NAME :
FAX :
TEL :
SER # :
NO. DATE TIME FAX NO./NAME DURATION PAGE(S) RESULT COMMENT
BUSY: BUSY/NO RESPONSE
NG : POOR LINE CONDITION / OUT OF MEMORY
CV : COVERPAGE
HP : POLLING
RT : RETRIEVAL
PR : RECEIVE (REMOTE TERMINAL IS IN FAX RECEIVE MODE)

561-839-1802

Test

2/10

DDR 4/3/15

9:53 A.M EST

12:00pm
Ted Shirkhgoo
D/F/CP

Transmission Report

Date/Time	07-07-2010 17:57:57	Transmit Header Text	
Local ID 1	956-548-2001	Local Name 1	Dream Cars

This document Confirmed
(reduced sample and details below)
Document size : 8.5"x11"

[redacted]

To view a High Resolution & Color copy of this fax:

1. Go to www.helloFax.com/HighRes

2. Enter Access Code: [redacted]

1655 3301239

Total Pages Scanned: 1 Total Pages Confirmed: 1

No.	Job	Remote Station	Start Time	Duration	Pages	Line	Mode	Job Type	Results
001	940	FAXTRAN64	17-57-57	00:00:20	1/1	1	EC	HS	CP14400

Abbreviations.

HS: Host send	PL: Polled local	MP: Mailbox print	CP: Completed	TS: Terminated by system	
HR: Host receive	PR: Polled remote	RP: Report	FA: Fail	G3: Group3	
WS: Waiting send	MS: Mailbox save	FF: Fax Forward	TU: Terminated by user	EC: Error Correct	

Hello,
I'm Working

Wednesday September 30, 2015

Reservation Confirmation
2809F1A3 1126-317
Created 09/30/2015 [illegible]
Booking System Mobile Standalone

For: Bella Monterey travelogue
Fax: 1(855) 330-3239
Attn: Monterey Travelogue
Subject: Booking Confirmation

Dear Monterey Travelogue:

[illegible]

Hotel

Booked to:	Gligh trity	State:	American Samoa
Address:	Hotel	ZIP code:	5698
City:	Page Page	Country:	USA
Email address:	n [illegible]	Telephone number:	5843656464

Billing Information

Card type:	Visa	Expiry Date:	09/2015
Card Number:	4XXXXXXXXXXX1111	CSV Number:	656
		Guest Total:	679.20

Room Details

Number of Rooms:	1	Number of Nights:	1
Check In:	October 15, 2015	Check Out:	October 16, 2015

Guest Information

First Name:	gligh	Last Name:	trity

Room Rate:	Date	Oct 15
	Rate	472.00

Sub-Total: $472.00
Tax (14.000%): $ Total: 679.20

Note: Rates are subject to availability
Book 29 days or more in advance

Special Request 4847

Thank you for booking with us online.

1-888-877-1695

Hey!

Test

from

Greensboro

Test Fax from Westley

HELIOS

6410 Poplar Ave Suite 800
Memphis TN 38119

TO: mikeptest1
Company Helios
Fax 12132942943
Phone 5551212

FROM
Fax
Phone 913-318-6792
E mail m chael philips@pmsionline com

Comments: notes
more notes
ayhywrey
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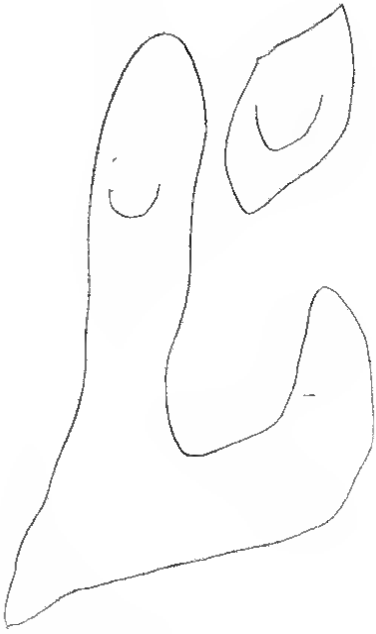
Date and time of transmission Thursday March 31 2016 8 08 16 PM
Number of pages including this cover sheet 01

Pg 2



Appetizers KHAI VỊ

A1 **Spring Roll** (2 Rolls) $3.00
Steam rice paper pork, shrimp, raw noodle salad
Gỏi Cuốn

A2 **Egg Roll** (3 pieces) $3.00
Chả Giò

A3. **Grill Pork Spring Roll** (2 Rolls) $4.00
Gỏi Cuốn Thịt Nướng

Beef rice noodle soup (PHỞ)

P1 **Eye of Round Steak** $7.95
Phở Tái (S. $6.95)

P2 **Eye of Round Steak & Brisket** $7.95
Phở Tái Chín (S. $6.95)

P3 **Eye of Round Steak & Flank** $7.95
Phở Tái Nam (S. $6.95)

P4 **Brisket & Flank** $7.95
Phở Chín Nam (S. $6.95)

P5 **Eye of Round Steak & Brisket** $7.95
Phở Tái Gầu (S. $6.95)

P6 **Meat Ball** $7.95
Phở Bò Viên (S. $6.95)

P7 **Special Beef Combination** $8.25
Phở Đặc Biệt (S. $7.25)

P8 **Seafood Combination** $8.95
Phở Đế Biển Đặc Biệt (S. $7.95)

P9. **Chicken Breast** $7.95
Phở Gà (S. $6.95)

Vermicelli Bowls (BÚN KHÔ)

B1 **Grilled Pork** $7.95
Bún Thịt Nướng

B2 **Grilled Chicken** $7.95
Bún Gà Nướng

B3 **Grilled Pork & Shrimp** $8.50
Bún Tôm Thịt Nướng

B4 **Grilled Pork & Egg Roll** $8.50
Bún Thịt Nướng Chả Giò

B5 **Grilled Pork Shrimp & Egg Roll** $9.25
Bún Tôm Thịt Nướng Chả Giò

B6 **Shrimp & Egg Roll** $8.50
Bún Tôm Chả Giò

B7 **Grilled Shrimp** $8.95
Bún Tôm Nướng

B8 **Vermicelli Egg Roll & Vegetables** $7.50
Bún Chả Giò

B9 **Vermicelli Lemon Grass Beef** $8.50
Bún Bò Xào Sả

B10 **Vermicelli Lemon Grass Chicken** $8.50
Bún Gà Xào Sả

Rice noodle - Egg noodle (HỦ TIẾU - MÌ)

N1 **Stir Fried Noodle/ Egg Noodle with Beef** $8.75
Hủ Tiếu/ Mì Xào Bò

N2 **Stir Fried Noodle/ Egg Noodle with Chicken** $8.75
Mì Xào Gà

N3. **Stir Fried Noodle/ Sea Food Egg Noodle** $8.75
Mì Xào Đế Biển

N4. **Seafood Crispy Egg noodles** $8.75
Mì Xào Dòn

Rice Dishes & Grill (COM DĨA)

R1 **Grilled Pork** $7.95
Cơm Thịt Nướng

R2. **Grilled Chicken** $7.95
Cơm Gà Nướng

R3 **Grilled Chicken, Egg** $8.50
Cơm Gà Nướng Hột Gà

R4 **Grilled Pork Egg** $8.50
Cơm Thịt Nướng Hột Gà

R5. **Grilled Pork Shrimp Egg** $9.25
Cơm Thịt Nướng Tôm Hột Gà

R6. **Grilled Chicken, Shrimp Egg** $9.25
Cơm Gà Nướng Tôm Hột Gà

R7 **Grilled Shrimp** $9.00
Cơm Tôm Nướng

R8. **Grilled Shrimp Egg** $8.50
Cơm Tôm Nướng Hột Gà

R9 **Chicken Hen Fried Spice** $8.50
Pheasant Recipe (Whole Chicken $11.95)
Cơm Gà Xối Mỡ

R10. **Grilled Beef Short Ribs** $8.90
Cơm Suờn Bò Nướng Hàn

Rice Dishes Chinese Cuisine (COM DĨA XÀO)

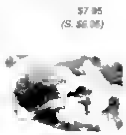
R11 **Beef, Broccoli Carrot** $8.75
Cơm Bò Xào Bông Cải Carrot

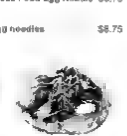
R12. **Chicken Broccoli Carrot** $8.75
Cơm Gà Xào Bông Cải Carrot

R13. **Seafood Broccoli Carrot** $9.25
Cơm Đế Biển Xào Bông Cải Carrot

R14 **Filet Mignon Steak Cubes, Onions** $8.95
Cơm Bò Lục Lắc

R15 **Combination Fried Rice** $8.25
Cơm Chiên Thập Cẩm (*Beef, Chicken, Shrimp, Egg*)





Fax

To	5032001900	From	EPro
Company		Phone	
Subject	TEST TEST TEST	Fax	
Date	April 16, 2013 3:23:41 PM	Pages	1

TEST TEST TEST TEST TEST TEST

Lexmark X736de

Supplies Menu

Replace Supplies

Toner Cartridge
Imaging Kit
Waste Toner Bottle
Black Cartridge
Color Cartridge
Photoconductor Kit
Maintenance Kit
Fuser
Transfer Module

Supplies Status

Toner Cartridge
Imaging Kit
Waste Toner Bottle
Black Cartridge
Color Cartridge
Photoconductor Kit
Maintenance Kit
Fuser
Transfer Module

Paper Menu

Default Source

Paper Size/Type

Tray 1 Size
Tray 1 Type
Tray 2 Size
Tray 2 Type
MP Feeder Size
MP Feeder Type
Multi-purpose Size
Multi-purpose Type
Manual Feed Size
Manual Feed Type
Envelope Size
Configure MP

Paper Texture

Plain Texture
Card Stock Texture
Transparency Texture
Recycled Texture
Glossy Texture
Heavy Glossy Texture
Label Texture
Envelope Texture
Rough Envelope Texture
Letterhead Texture
Preprinted Texture
Colored Texture
Light Texture
Custom Texture 1
Custom Texture 2
Custom Texture 3
Custom Texture 4
Custom Texture 5
Universal Setup

Paper Weight

Plain Weight
Card Stock Weight
Transparency Weight
Recycled Weight
Glossy Weight
Heavy Glossy Weight
Label Weight
Envelope Weight
Rough Envelope Weight
Letterhead Weight
Colored Weight
Preprinted Weight
Light Weight
Heavy Weight
Custom Type Weight
Custom 1 Weight
Custom 2 Weight
Custom 3 Weight
Custom 4 Weight
Custom 5 Weight

Paper Loading

Plain Loading
Card Stock Loading
Transparency Loading
Recycled Loading
Letterhead Loading
Preprinted Loading
Glossy Loading
Heavy Glossy Loading
Colored Loading
Light Loading
Heavy Loading
Custom Type 1 Loading
Custom Type 2 Loading
Custom Type 3 Loading
Custom Type 4 Loading
Custom Type 5 Loading
Universal Loading

Custom Types

Create Type
Custom Type 1
Custom Type 2
Custom Type 3
Custom Type 4
Custom Type 5
Delete Types

Custom Names

Custom Name 1
Custom Name 2
Custom Name 3
Custom Name 4
Custom Name 5
Custom Name 6

Universal Setup Sizes

Universal Setup
Width
Height
Feed Direction

Custom Scan Sizes

Custom Scan 1
Custom Scan 2

Paper Menu (Cont.)

Paper Weight

Plain Weight
Card Stock Weight
Transparency Weight
Recycled Weight
Glossy Weight
Heavy Glossy Weight
Label Weight
Envelope Weight
Rough Envelope Weight
Letterhead Weight
Colored Weight
Preprinted Weight
Light Weight
Heavy Weight
Custom Type Weight
Custom 1 Weight
Custom 2 Weight
Custom 3 Weight
Custom 4 Weight
Custom 5 Weight

Paper Loading

Plain Loading
Card Stock Loading
Transparency Loading
Recycled Loading
Letterhead Loading
Preprinted Loading
Glossy Loading
Heavy Glossy Loading
Colored Loading
Light Loading
Heavy Loading
Custom Type 1 Loading
Custom Type 2 Loading
Custom Type 3 Loading
Custom Type 4 Loading
Custom Type 5 Loading
Universal Loading

Custom Types

Create Type
Custom Type 1
Custom Type 2
Custom Type 3
Custom Type 4
Custom Type 5
Delete Types

Custom Names

Custom Name 1
Custom Name 2
Custom Name 3
Custom Name 4
Custom Name 5
Custom Name 6

Universal Setup Sizes

Universal Setup
Width
Height
Feed Direction

Custom Scan Sizes

Custom Scan 1
Custom Scan 2

Did you

Get this?

4 pages total

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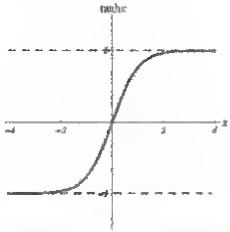
TEST Fex from Alex



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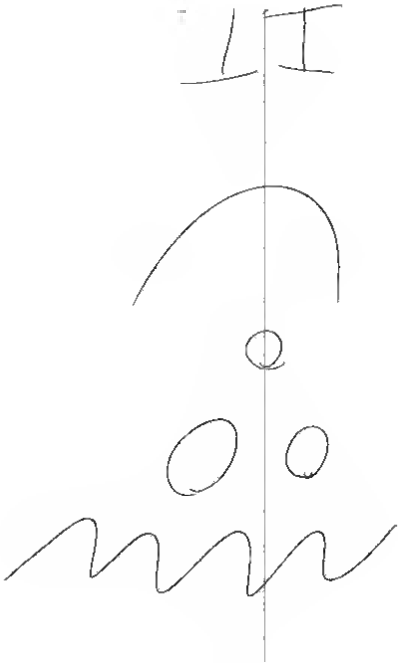

TEST My FAX

7-18-18

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O-Net

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Fax V.4.1

This is test fax

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test 2

test 2

test 2

- To get best quality, follow the steps along this sheet.
- Para obtener la mejor calidad, siga los pasos de esta hoja.
- Pour obtenir de meilleurs résultats, suivez la procédure indiquée sur cette feuille.
- Per ottenere una qualità ottimale, attenersi alle istruzioni fornite in questo documento.
- Um optimale Qualität zu erzielen, befolgen Sie die hier aufgeführten Anweisungen.
- Voor de slagpeine in dit document uit voor de beste kwaliteit.

- 가장 좋은 품질을 보기 위해서는 이 안내서의 단계를 따르십시오.

要获得最佳质量，请按照本页的步骤说明进行操作

最高品質でプリントする為には左記の順序に従って下さい。

TEST

10-14-15

Pillow

Test Fax

USA
State and Capital
C A N A D A
Olympia
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OREGON
MONTANA
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WYOMING
NORTH DAKOTA
Bismarck
MINNESOTA
SOUTH DAKOTA
Pierre
St. Paul
WISCONSIN
Madison
MICHIGAN
Lansing
Lake Superior
Lake Huron
Lake Michigan
Lake Erie
Lake Ontario
IOWA
Des Moines
NEBRASKA
Lincoln
Cheyenne
Carson City
Salt Lake City
NEVADA
UTAH
Denver
COLORADO
Sacramento
CALIFORNIA
Santa Fe
NEW MEXICO
ARIZONA
Phoenix
OKLAHOMA
Oklahoma City
TEXAS
Austin
ILLINOIS
Springfield
Jefferson City
MISSOURI
INDIANA
Indianapolis
OHIO
Columbus
KENTUCKY
Frankfort
TENNESSEE
Nashville
Columbia
ARKANSAS
Little Rock
MISSISSIPPI
Jackson
LOUISIANA
Baton Rouge
ALABAMA
Montgomery
Atlanta
GEORGIA
Tallahassee
FLORIDA
SOUTH CAROLINA
NORTH CAROLINA
Raleigh
VIRGINIA
Richmond
WEST VIRGINIA
Charleston
WASHINGTON D.C.
MARYLAND
DELAWARE
Dover
PENNSYLVANIA
Harrisburg
Annapolis
NEW JERSEY
Trenton
NEW YORK
Albany
VERMONT
Montpelier
NEW HAMPSHIRE
Concord
MASSACHUSETTS
Boston
RHODE ISLAND
Providence
CONNECTICUT
MAINE
Augusta
PACIFIC OCEAN
ATLANTIC OCEAN
Gulf of Mexico
MEXICO
CUBA
BAHAMAS
Bering Strait
RUSSIA
ALASKA
CANADA
Juneau
HAWAII
Honolulu
Pacific Ocean
LEGEND
International Boundary
State Boundary
Country Capital
State Capital
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Testing Fax Machine

p 1

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FAX

Date. 5/12/2 1 2:66 A M

Pages. 5

Subject. tes

To: Test
Organization: esL
Fax Number. 912132342973 4 1
Phone Number

From. Adm n st r
Organization:
Fax Number:
Phone Number
Email

Comments:
test

FaxFinder

If you received this fax in error or would like to opt-out, please call _____ , fax _____ or email

FAX TEST

#7

Test

This is Akhari

FAX

To: **TESTING FAX**
Company
Fax: 16563301239
Phone

From:
Fax
Phone
E-mail: ben.grady@interpublic.com

NOTES:

TESTING

Date and time of transmission: Friday, October 30, 2015 10:15:32 AM
Number of pages including this cover sheet: 01

TEST FROM ZEYON

TO
FRANK

Room 3: Queen			Adults: 2	Children: 0
First Name	Lola	Last Name:	Mola	

+ Included: testing testing testing testing testing testing testing testing
Not Included: testing testing testing testing testing testing testing testing

Room Details	Date	October 24	October 25	October 26
	Rate:	$ 32.00	$ 32.00	$ 32.00

Sub-Tota $ 96
Tax (10%) $ 9.6 = Tota $ 105.60

Note: Rates include Extra Person/Child Fees

Room 4: Prudhon Standard Handicap			Adults: 2	Children: 0
First Name	Lola	Last Name:	Mola	

+ Included: testing testing testing testing testing testing testing testing
Not Included: testing testing testing testing testing testing testing testing

Room Details	Date:	October 24	October 25	October 26
	Rate:	$ 32.00	$ 32.00	$ 32.00

Sub-Tota $ 96
Tax (10%)=$ 9.6 Totals: 105.60

Note: Rates include Extra Person/Child Fees

Room: 5: Block Queen Suite			Adults: 2	Children: 0
First Name	Lola	Last Name:	Mola	

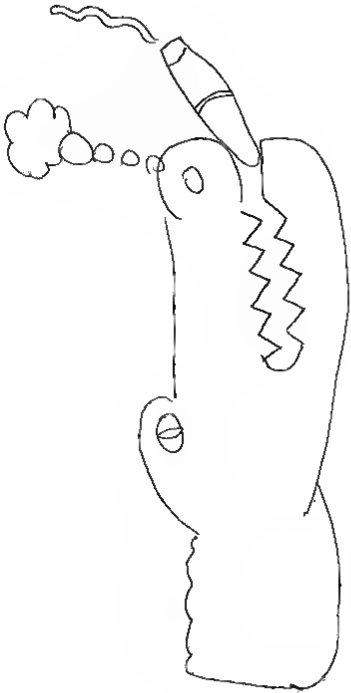
+ Included: Queen's Bed, Gold Coins, Gold TV
Not Inc: solid 14 rivets

Room Details	Date	October 24	October 25	October 26
	LCF	$ 0.00		

Sub-Tota $ 0
Tax (10%)=$ 0 Total $ 0.00

Note: Rates inc ude Extra Pe son/Child Fees

Thanks for visiting JWright.com or your purchase!



ID: 2014
ENTERED ON FOR:
[illegible] 41 [illegible]

Thursday, September 18, 2014

Reservation Confirmation
D4884429 1711 285
Created 08/18/2014 10:26:43 GMT
Booking Source PMS

To: Bata EMALU BEER INN HOTEL SUITS
Fax: +1 (239)-290-2943
Attn: Alpha Chairman
Subject: Booking Confirmation

Dear Alpha Chandima

We have pleasure in [illegible] reservation request received by us. Please [illegible] Should you require any [illegible] please advise us. We look forward to your [illegible] Thank you. Tel: +1 (440) 232 [illegible] e-mail: [illegible]@insight.com

Yours [illegible]

Guest Info

Company	Test Test	Name	American Samoa
Address	4396486549	Zip Code	626435
City	Pago Pago	Country	USA
Email Address	p.kumar@insight.com	Telephone Number	4843854316

Payment Information

Credit Card	Visa	Expiry Date	09/2014
Credit Card	4xxxxxxxxxxx8812	Amount due	$95.49

Room Details

Number of Rooms	1	Number of Nights	2
Check In Date	September 17 2014	Check Out Date	September 19 2014

Room 1 Pricing Standard Rate/Day

Rate Name	Test		Rate Number	Test	
Room Details		Date	Sept 17	Sept 18	
		Rate	$32.00	$32.00	

Sub-Total: $64.00
Tax 10.00(%) $6.49 – Fees $25.00 Total $95.49

Note: Rates include Intra Pacific Hotel Fees

Special Request: Nothing

[illegible]

Advertising
Agriculture
Arts/culture
Automobiles
Brain
Brain/mind
Business
Business/economy
Communication
Communications
Computers
Conflict
Conflict/peace
Conflict/peace/war
Conflict/peace/weapons
Crime
Crime
Crime/drugs
Cyberspace
Decision making
Diabetes
Drugs
Economic
Economics
Economy
Education
Energy
Environment
Food
Food/agriculture
Freedom
Genetics
Government
Health
Health/genetics
Health/medicine
Health

Hunger
Industry
Labor force
Leisure
Materials
Medicine
Minority cities
Mortal/ethics
Peace
Politics
Population
Poverty
Privacy
Quality of life
Religion
Robotics
Schools
Science/astronomy
Science/biology
Science/biology/computers
Science/technology/electronics
Science/technology/optics
Science/technology/quantum
Science/technology/space
Science/technology/weapons
Science/technology/weather
Security
Security/privacy
Space
Sustained by
Technology
Transportation
Transnational/space
Transportation/water
War
Water

WorkCentre 3550
Multifunction Printer

Configuration Report

xerox

Report Profile
Profile Date 27 OCT-2010
Profile Time 01:34PM THU

Device Profile
Customer Support www.xerox.com
Supplies Number
Customer Asset Tag Number
Xerox Asset Tag Number
Machine Name WorkCentre 3550
Machine Serial Number VNA850039
Total B&W Impressions 58340
Fax Line Number 5024734878
Billing Plan Metered

Installed Options
Embedded Fax Installed/Enabled
Email Installed/Enabled
Network Scanning Installed/Disabled
Fax Card Installed
Fax Memory Size 7MB
USB Enabled
Main Memory Size 256 MBytes
Additional Memory Size 0 MBytes
Foreign Device Interface Not Installed
Silent Operation Option Enabled
Domain of Trays 1

Device Setup
System Software Version 25.002.04.001
Main Controller 1.02.04.01
Image Output Terminal Software Version 1.50.00
Network Controller Software Version V6.01.01
IP Core Software Version 6.8.3.P
Tray 2 Software Version Not Installed
PCL6E Version PCL6e 0.18.02.52.24 2011
PCL XL Version PCL6 6E 01-26-2010
PS Version 2.83.00.00.00 10-14-2010
TIFF Version TIFF 6.00.01.03.00.00.10-14-2010
PDF Version 2.83.00.00.00.00 10-14-2010
Power Saver 30 minutes
Startup Config Report Enabled
Error Sheets Disabled
Banner Sheets Disabled
Authentication Mode Disabled

Network Setup
NetWare Settings
NetWare Disable
Printer Server Name XRX9C934E0015C8
NDS Tree XEROX_DS_TREE
NDS Context O=XEROX_DS_CONTEXT
Novell Proxy Transport IPX
IPX Frame Types Auto
Hop Distance 5
SAP Rate 60
Primary File Directory Server
TCP/IP Settings
TCP/IP Enable
Host Name XRBRN30b
IP Address 192.168.52.24
SubNet Mask 255.255.255.0
Default Gateway 192.168.52.1
Automatic Addressing STATIC
LPR Enable
LPD Port Number 515
Raw TCP/IP Printing Enable
Raw TCP/IP Printing Port Number 9100
IPv6 Disabled
IPv6 Address Link-Local
IPv6 Address Stateless 1
IPv6 Address Stateful
IPv6 Address DHCPv6 None

Network Setup (Cont.)
Pv6 Address Manually Entered
Default IPv6 Gateway
DNS Setting
Domain Name programmed host
Primary DNS Server 192.168.53.18
Alternate DNS Server 1 10.0.252.99
Dynamic DNS Enable
IPv6 Primary DNS Server 0.0.0.0
IPv6 Alternate DNS Server 1 0.0.0.0
SLP Setting
SLP Enable
Version 2
Port Number 427
Character Set US-ASCII
Directory Agent
Scope 1
Scope 2
Scope 3
Message Type MULTICAST
Multicast Radius 255
MTU 1400
AppleTalk Setting
AppleTalk Disabled
Name XRX9C934E0015C8
Zone *
Printer Type LaserWriter
HTTP Setting
HTTP Enabled
Port Number 80
Max Connections 32

Port Setup
Ethernet Profile
MAC Address 9C:93:4E:00:15:C8
Speed & Mode Auto
802.1X Disabled
Auth Type Off
USB Host Port Settings
USB Port Enabled

Fax Forward Setup
Fax forward to Fax number Disabled
Fax forward to Email notified Disabled

Media Trays
Media Trays Tray 1
Paper Type Plain Paper
Paper Color White
Paper Size 8.5 x 11"
Media Trays Bypass Tray
Paper Type Plain Paper
Paper Color White
Paper Size 8.5 x 11"

Network Authentication Setup
Kerberos
Default Realm
Default Address 0.0.0.0
Alternate1 Realm
Alternate1 Address 0.0.0.0
Alternate2 Realm
Alternate2 Address 0.0.0.0
Backup2 Address 0
SMB
NT Domain
Alternate1 Domain
Alternate2 Domain
Alternate3 Domain
Alternate4 Domain 1
Alternate5 Domain
Alternate6 Domain
LDAP

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TIMES
AMERICAN ASSOCIATION OF COMMUNITY COLLEGES
SEE ALL OFFERS

A rural partnership looks to foster a college-going culture

By Matthew Pembleton, Published June 1, 2011

AUSTIN, Texas — Two years ago Kevin Pollock was at a reception to meet community members as the new president of St. Clair County Community College (SC4) in Michigan when Kevin Miller approached him. The local K-12 superintendent's first words to Pollock were "We need to talk."

Kevin Miller (left), superintendent of Croswell-Lexington Schools, and Kevin Pollock, president of St. Clair County Community College, discuss an early college program crafted by the two systems.

Miller wanted to get started on a partnership between Croswell-Lexington Schools and SC4 as soon as possible. In a rural area with a high unemployment rate and where only 9 percent of the residents had a bachelor's degree, he saw collaboration between the two systems as critical to developing a college-going culture.

That culture would fit into the area's economic strategic plan: An educated, skilled workforce draws employers.

Pollock and Miller quickly began working together, developing an early college program for talented students that would allow them to earn both a high school diploma and an associate degree in five years. CLS was born. The two leaders outlined the program at the annual National Institute for Staff and Organizational Development conference this week.

A vigorous experience

1213-284-2943

Testing FAX

Test

Home Inspection Removal Checklist

Exterior

Removal of Mailbox and door lighting
Rear spot light
Remove plants and ornamentals
Front and side door wall items
Black edging and weeding removed
Remove call for camera security

Garage

Remove extra lights spotlights, lights
Work bench/shelving units
Surge protector door panel removed
Garage door opener removed to switch along w/ access switch(2)
Shelving and tall units switched
Garage unit removed

Interior

Switch out central air light ceiling
Switch out any fans and fan light
Fan door pulls switched
Removal all Decora switches-Lighted dimmer switches
Remove 3 signage directors to new home switch from old home
Any general lighting switched over
Remove alarm system-Rear door alarm-sec door knobs handles
Remove all electrical outlet cubes
Remove thermostat and alarm data for new home switchout
Remove uv light in furnace
Remove furnace filter
Remove grab bars in baths
Remove 3 shower heads
Remove towel bars centrals baths
Remove all mirror edge strips in baths

Send Result Report

KYOCERA

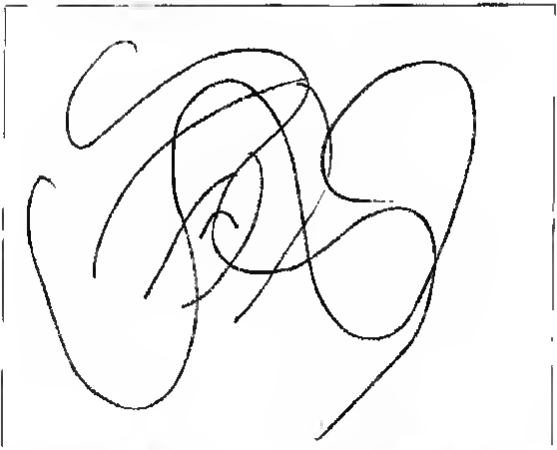
MFP

TASKalfa 5501

Firmware Version 2H7.2001.1MP.U0P.2014.01.16

Job No. : 178934 Total Time : 0'11"39 Page : 003

Complete



No.	Name and Type	Result	Detail
003	[illegible]	OK	200 dpi Normal

Test

MRMC

IT

Dept!

Hi

test

User Guide

BlackBerry Remote Stereo Gateway

- Brick And Mortar Media

  5 mi

  - (415) 525-4715
  - 43 Norfolk St, San Francisco, CA 94103 map

- ABC Ready Mix

  5 mi

  - (415) 850-3928
  - Serving San Francisco, CA 94102 map

- All Kinds Of **Concrete**

  .5 mi

  - (415) 837-0665
  - Serving San Francisco, CA 94102 map

- Daniel Daly Construction

  6 mi

  - (415) 780-8602
  - Serving San Francisco, CA 94102 map

- Everlast **Concrete**

  .6 mi

  - (415) 869-1054
  - Serving San Francisco, CA 94102 map

- Go-Mex Construction

  9 mi

  - (415) 513-0002
  - Serving San Francisco, CA 94102 map

- Lupe Navarrete **Concrete**

  .5 mi

  - (415) 826-9603
  - Serving San Francisco, CA 94102 map

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2. Enter Access Code: 914d12c63e

Education
Éducation

PDF Test File

For installations, your computer is equipped with a PDF (Portable Document Format) reader. You should be able to view any of the PDF documents and forms available on our site. PDF forms are indicated by these icons or

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Box 2703
Whitehorse Yukon
Canada
Y1A 2C6

Please visit our website at http://www.education.gov.yk.ca/

confidential

fax

To	**test**
Fax Number	877 1655
From	**jennifer blunkall**
Fax Number	

- Lorsque vous attribuez un téléphone à un nouvel employé, ne choisissez jamais le numéro de téléphone de l'employé comme mot de passe temporaire
- Programmez votre système de messagerie vocale de façon à ce que les utilisateurs doivent modifier leur mot de passe au moins tous les 90 jours
- Évaluez si la fonction prise directe centrale du réseau est nécessaire et, si non, elle devrait être désactivée par votre fournisseur d'équipement. Cette fonction vous permet d'effectuer des appels interurbains à travers votre boîte vocale lorsque vous êtes à l'extérieur
- Si la fonction prise directe centrale du réseau est activée, [illegible] soupçonnant de faire l'analyse des rapports d'utilisation afin d'éviter les usages abusifs de votre système de messagerie vocale.
- Éliminez toutes les boîtes vocales non attribuées

Ces mesures de sécurité sont de nature générale et peuvent ne pas protéger chaque aspect d'un système téléphonique particulier mais elles contribueront à vous rendre moins vulnérables à ce genre de fraude. Nous vous recommandons de communiquer avec votre fournisseur d'équipement téléphonique pour discuter des détails de votre configuration. Rappelez-vous que vous avez la responsabilité de payer pour les appels qui ont été effectués à partir de votre téléphone ou ceux qui ont été portés à votre numéro et acceptés, peu importe qui les a faits ou acceptés.

Si vous avez des questions sur la protection des systèmes de messagerie vocale et possédez un contrat d'entretien, communiquez avec nous au 1 800 771-3940. Sinon, contactez votre fournisseur d'équipement.

Êtes-vous une victime ?
Si vous croyez avoir été la cible d'activité criminelle, il est de votre responsabilité de contacter les autorités locales immédiatement. Bell sera heureux de collaborer avec vous et de participer à une enquête criminelle officielle à la demande de la police ou des autorités locales et avec votre consentement.

Cordialement,

Peter Kerr
Vice-président – petites et moyennes entreprises
Bell

Amanda
ORDER FOR B. M.

Note : Vous pouvez bloquer certains appels sans frais. Pour en savoir plus, composez le 611 et choisissez l'option 3.

Test fix only. Please discard

Name	Address	Phone	Email
Xina5	1234 easy st San Diego CA 123	(510) 4271718	t5@gmail.com
tina4	[illegible]		t4@gmail.com
tina burke	[illegible]		tina.burke@gmail.com

Test
Fax

FAX TEST

FAX TEST

TEST
JMB

8-12-16

Test

trkjwuSn dxkTestTextFile txt

test text file

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LE DICEN ADIÓS CON TRIUNFO Y LIDERATO
SUPER BOWL XLVIII
Seattle iimplacable!

THE TRUTH ABOUT WALL STREET AND WASHINGTON by G Carlin

http://dailybail.com/home/george-carlin-video-the-truth-about-wall-street-and-washingt.html

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http://dailybail.com/home/george-carlin-video-the-truth-about-wall-street-and-washingt.html

http://dailybail.com/home/george-carlin-video-the-truth-about-wall-street-and-washingt.html

x z x Communication Result Report (Jul 10 2018 5 04PM) x z x

Date/Time: Jul 10. 2018 5 03PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
9206	Memory TX	918884732953	P 1	OK	

Reason for error
E.1) Hang up or line fail
E.2) No answer
E.3) Exceeded max. E-mail size
E.4) Busy
E.5) No facsimile connection
E.6) Destination does not support IP-Fax

x z x Communication Result Report (Jul 10 2018 5:03PM) x z x

Date/Time: Jul 10. 2018 5:03PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
9206	Memory TX	918884732953	P 1	OK	

TRANSMISSION VERIFICATION REPORT

TIME 12/28/2012 04:39
NAME DOCO FAX
FAX 9121298635[illegible]
TEL 9121298635[illegible]
SER # BROJ6J262916

DATE,TIME 12/29 04:39
FAX NO./NAME 11122462#5011233382773919
DURATION 00:00:00
PAGE(S) 00
RESULT BUSY
MODE STANDARD

BUSY: BUSY/NO RESPONSE

Doco Test

Adamg

Testing

1-855-330-1239

IMPORTANT!

You must scan this alignment page for best print quality.

STEP 1: Lift the lid. Place this alignment page face down on the right front corner of glass. Close the lid.

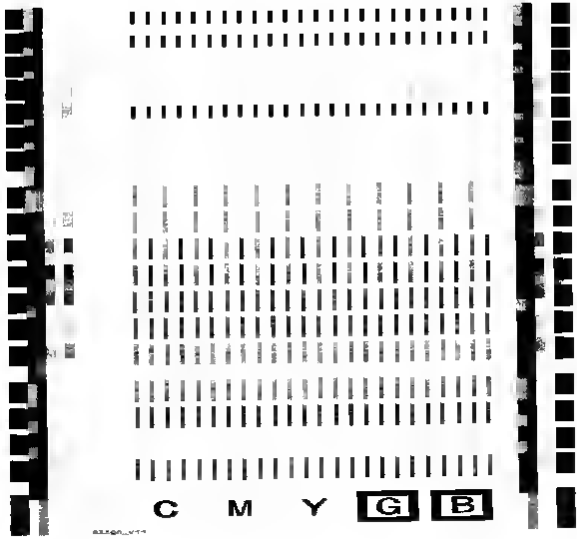
STEP 2: Press OK.

FAX TEST

Test Fax from Westley

Did it work

Call 387


C
M
Y
G
B

testy faxy

GALLANT

This is a Test Fax!

Test fax test fax

Test fax test fax

Yo Adrian!

MISS HELLSING

All empoyled by her are bound to die slow painful deaths. She's also a control freak, still wanna join?

zza Delivery

thank you

Windows XP
Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your FAXmaker on WKS7

The information below describes your printer driver and port settings

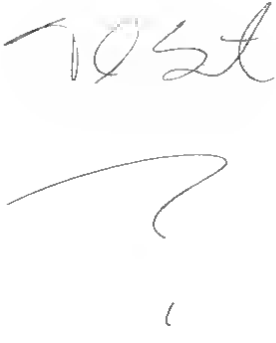
Submitted Time: 10/41/17 AM 12/28/2011
Computer name: WKS7
Printer name: FAXmaker
Printer model: FAXmaker
Color support: No
Port name(s): GFIFAX
Data format: RAW
Location: FAXmaker Fax Server on \\WKS7
Comment: FAXmaker main printer driver. Setting to default is recommended
Driver name: unidrv.dll
Data file: faxmaker.gpd
Config file: unidrvui.dll
Help file: unidrv.hlp
Driver version: 6.00
Environment: Windows NT x86
Default datatype: RAW

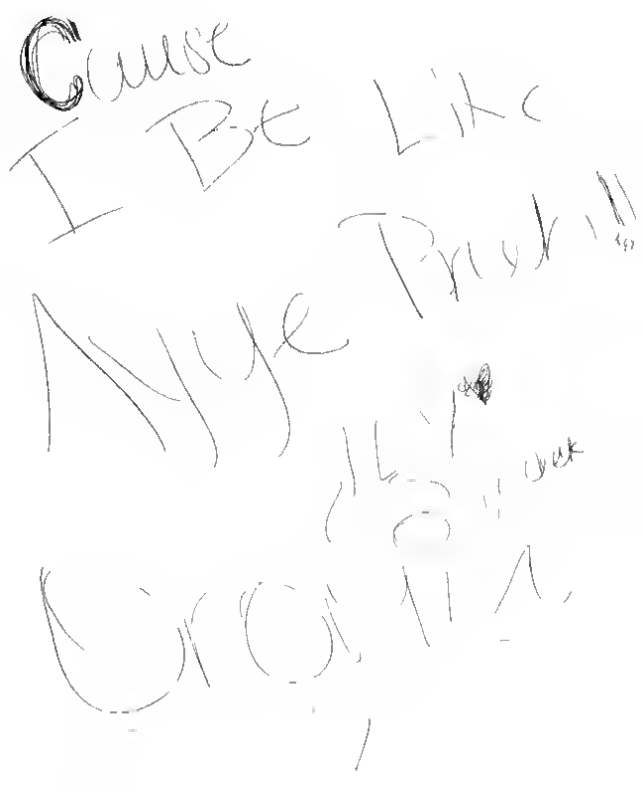
Additional files used by this driver:
C:\WINDOWS\System32\spool\DRIVERS\W32x86\3\unires.dll (6.0.6000.16436 (winmain(wmbla).070123-1305))
C:\WINDOWS\System32\spool\DRIVERS\W32x86\3\stdnames.gpd

This is the end of the printer test page.

This fax was sent with GFI FAXmaker fax server. For more information, visit: http://www.gfi.com

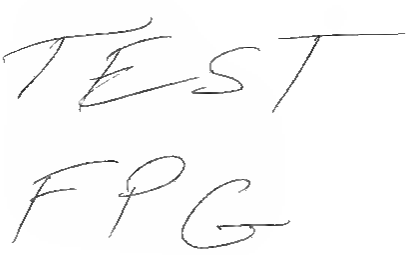
[illegible]
[illegible]




Cause
I Be Like
Nike Bruh !!!
Original

Test Fax
FV
2132942943

This [illegible]
[illegible] not working.


TEST
FPG

FAX TEST

Fax Cover Page

TO	
FAX NUMBER	1 (888) 877 1655
FROM	BackOfficeXerox
COMPANY	Buckingham Research
FAX NUMBER	
DATE	April 02, 2014
SUBJECT	Test

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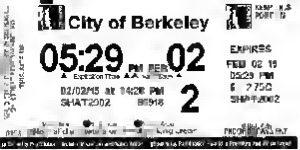

City of Berkeley
05:29 PM FEB 02
EXPIRES
FEB 02 15
05:29 PM
2
SHAT2002

test

1-855-330-1239

Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test.

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	Off
Rings to Answer	5
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Fax Speed	Medium (14400)
Fax Forwarding	Off
Communication Error Redial	Redial

Refer to your User Guide for more information on the fax test and settings

Instructions on how to rerun this test.

Step 1 Press the "Fax" button
Step 2 Choose the "Settings" menu
Step 3 Choose the "Fax Setup" menu
Step 4 Choose the "Fax Tools" menu
Step 5 Choose the "Run Fax Test" menu

CN593F329D

FDF1CN1647AR

ATTENTION MARK FRIDAY

		Beg.	END	
(1)	SECURE Socket layer (SSL)	4443	4443 -	192.168.0.100
(2)	Secure Shell SSH	22	22	192.168.0.100
(3)	SSH TO HPV 20	2422	22	192.168.0.100
(4)	HTTP.	80	80	192.168.0.100

MIO Port Forwarding.

Same For All

Alpena 01 Port Forwarding INFO

192.168.0.100

Current IP

This is
a test
Fax.

HP Officejet Pro 8610 Series

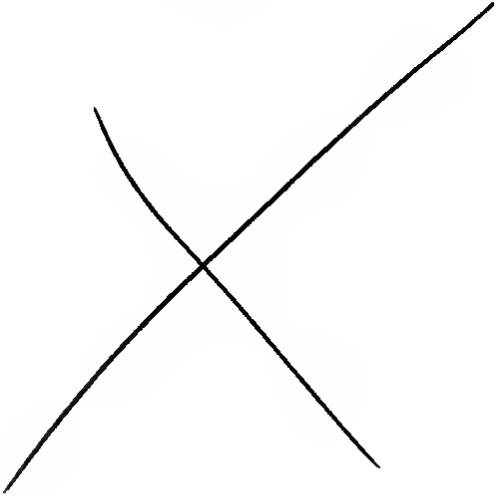
Fax Log for
Ajeet Singh
888-840-3384
Apr 11 2016 9:07AM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Apr 11	9:06AM	Fax Sent	13177352858	0:00 N/A	0	Error 334*

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

7724



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FAX (612) 555-1213
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Please complete if you are ordering imprinted products

Please, Print

Other Imprint Changes

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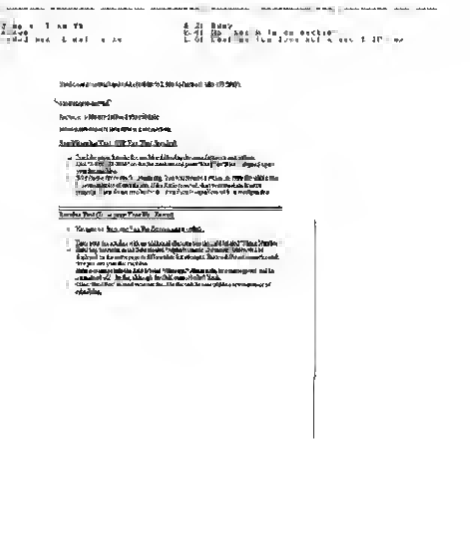
2	Software Plus Associated
3	100 MAIN STREET - SUITE 101
4	ANYTOWN, MN 12345
5	(612) 555-2712
6	mail@jdmail.com

4 Communication Result Report (Jan. 23. 2013 5:46PM)

Date/Time: Jan 23 2013 6:46PM

File No.	Mode	Destination	Pg(s)	Result	Page Not Sent
0260	Memory TX	5820013000	P 1	OK	



Test

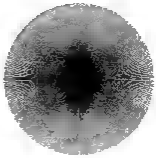
1 2 3 4

Max sat 1

Printer Test Page

Color Wheel

Gray Ramp



1 Degree Radial Lines

Imageable Area

Page Size: 8.1x10.56in
205.7x268.2mm

Lower-Left: 0.19x0.19in
4.9x4.9mm

Upper-Right: 8.29x10.75in
210.7x273.2mm

Resolution: 600x600dpi

Interpreter Information

PostScript Level 3

Version 3010 (862)

Product: GPL Ghostscript

Serial #: 42

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	Hospital: Complimentary annual health check-up
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Membership Center	- Call Center Service
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*Terms and conditions apply.

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	*All amounts are in THB

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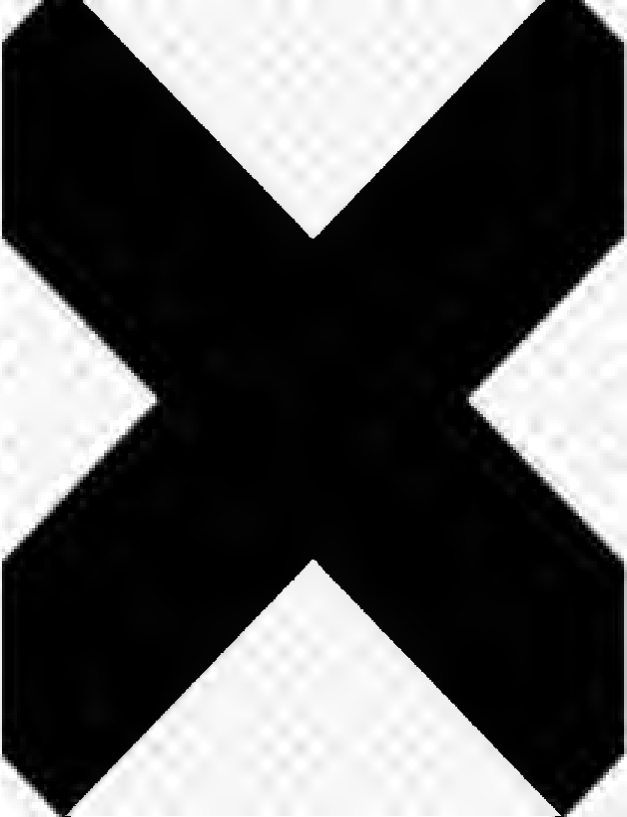
Thailand Elite



HP has split into two companies. For Enterprise content please go to Hewlett Packard Enterprise.

HP Customer Support

HP Fax Products - Testing Your HP Fax Machine with the HP Fax Test Service

Introduction

This document will assist you in testing your HP Fax machine using the HP Fax Test Service.

Print this document for easy reference by clicking the **Printable version** link in the upper right corner of this page.

Test your fax machine

To test the capability of your fax machine, follow the directions below.

NOTE:

Be sure that your phone number is not Caller ID blocked by your telephone company prior to attempting to send and receive a fax. Preceding *82 before dialing the toll free number will unblock the Caller ID blocking feature in most areas. Other phone company services can prevent you from receiving a fax, including voice mail, call blocking, or call privacy features.

NOTE:

Whenever troubleshooting a fax issue, it is good practice to set the **Automatic Reports** option to **Every Error** before attempting a test fax. This way, even if the sent fax fails, an error code will be generated that will guide you in future troubleshooting. This option is available in different places on different products, consult the product User's Guide for specific steps.

1. Send a one page black and white test fax to **1-888-hpfaxme** (1-888-473-2963).
2. When your fax is received by the HP Fax Test Fax Service, we will generate a return fax to you within five minutes confirming that we received your fax. This verifies that you can both send and receive a fax with your fax machine.

If you do not receive a return fax within 5-7 minutes, there may be a problem with the setup of your fax machine. Consult the user manual that came with the product for proper setup and configuration.

NOTE:

The most common cause of failure is that the fax number set in the FaxHeader on the machine does not match the number of the phone line connected to the fax. Also, ensure that the FaxHeader contains the Full 10-digit telephone number of the fax machine, including the area code.

For more information or assistance, click **Contact HP** at the top of this page.

FAX COVER SHEET

TO	
COMPANY	
FAXNUMBER	12132942943
FROM	CloudCallCloudCall
DATE	2017-09-20 18:22:48 GMT
RE	*test*

COVER MESSAGE

This is test

Marvin Snell
2041 Vista Grande Drive
Vista Ca 92084

confidential

fax

To.	**<15105450990>**
Fax Number	15105450990
From	**Marvin Snell**
Fax Number	817 710-5364
Business Phone	760-851 2886
Home Phone	
Pages	1
Date/Time	10/10/2009 8:28:34 PM
Subject:	hey there

---

no there

ATTN ELEVEN XUE

无纺布袋定单的餘款为 $5283.00

我們會安排 7月18号送貨到 FUSION SUPERMARKET

請準備餘款支票以便交給送貨員。

謝謝！

FIONA

ADD PRINTING & PACKAGING

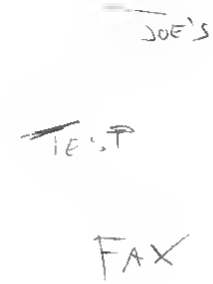
2231 Orchard Lane
White Bear Lake MN 55110

confidential

fax

To	**test**
Fax Number	1 888 677 1665
From	**Bob & Carol LaChapelle**
Fax Number	651 777-5479
Business Phone	
Home Phone	651 777-5458
Pages	1
Date/Time	7/6/2011 5 46 09 PM
Subject	test

test


JOE'S
TEST
FAX

Test

HS

Test

fax back please
951-674-3313

To	fax toy
Fax number	1-888-877 1655
From	Rachel Rakin
Fax number	2154242078
Business phone	
Home phone	
Date & Time	1/3/2012 11:48:48 AM
Pages	1
Re	test

test fax

855-330-1239

Test From DOE

2018

Fax test

This side up

۳. در الگوریتم Quick Sort الف) بدترین حالت در چه شرایطی رخ می‌دهد؟ ب) بهترین حالت چطور؟ در هر مورد نگه آرایه شامل اعداد ۱ تا n را مثال بزنید که سرانجام مورد نظر را داشته باشد. ج) برای آنکه تا حد ممکن از بدترین شدن مرتبه زمانی الگوریتم به $O(n^2)$ جلوگیری کنیم، چه تمهیری پیشنهاد می‌کنید؟

۴. مجموعه‌های شامل n نقطه (x, y) داریم. الگوریتمی مبتنی بر روش تقسیم و حل ارائه کنید که فاصله بین نزدیکترین ۲ نقطه را مشخص کند. با انجام تحلیل پیچیدگی زمانی، مرتبه زمانی الگوریتم را معین کنید.

۵. مسأله کاشی‌کاری کاشی‌هایی داریم که هر یک مطابق شکل زیر از ۲ قطعه با اندازه ۱×۱ تشکیل شده‌اند.

یک کاشی

اتاقی مربعی شکل با ابعاد $n \times n$ داریم (n توانی از ۲ است) که می‌خواهیم کف آن را با چنین کاشی‌هایی بپوشانیم. در کف این اتاق حفره‌ای با ابعاد ۱×۱ وجود دارد که مانند زوی آن را با کاشی بپوشانیم. الگوریتمی به روش تقسیم و حل ارائه کنید که عدد n (ابعاد اتاق) و موقعیت حفره را گرفته و عمل کاشی‌کاری را انجام دهد. مرتبه زمانی الگوریتم را مشخص کنید. در شکل زیر، اتاقی با ابعاد ۸×۸ نشان داده شده (مربع سایه شکل حفره را نمایان می دهد) و در تصویر بعد، حاصل کاشی‌کاری آن دیده می‌شود.

TEST FAX

Call Mike [redacted]

The 1st Serino Family Reunion

DATE	Saturday, September 18, 2010
TIME	6pm – 11pm
PLACE	Arboretum Condominium Clubhouse Summit Street Peabody, MA 01960

Hello Serino Cousins! We would like all the family together from the oldest to the youngest for a night of food, drinks, fun and lots of laughter Please bring either an appetizer, an entrée, or dessert. Don't forget BYOB!!
So, please let us know if you can make it (contact information is below) Let's enjoy a fun evening!

RSVP by September 3rd

Barbara (Beebe) Fortunato	*bl[illegible]@yahoo.com or 978-3307219*
Dolores (Giello) Torelli	*978-535-1234*
Anne Marie Serino	aserino@cna.mass.edu

This is a friday test of fax FRIDAY

1 503 600-1300

MC

Mc Test

Test

Fax

FOR SALE

2010 DUFFY 22 CC ELECTRIC BOAT

48 volt power plus advanced DC motor.
18 six volt deep cycle marine batteries.
Automatic battery watering system.
Automatic smart charge battery system.
All U.S.C.G. safety equipment included with 2010 vessel safety inspection passed.
White sunbrella surrey top with fully surrounding enclosures. Complete covering travel and docking cover. Always stored undercover and used in fresh water.
Heavy duty dual axle trailer with brakes.
PRICE. $30,000.00
OPTIONS TO NUMERIOUS TO MENTION HERE. CALL 352-881-6662 FOR DETAILS AND OPTIONS LIST.

1137

FAX

TEST

#2

001 Density (HOME)	(-3 -2 -1 0 1 2 3)	0	0
002 Resolution (HOME)	(STD Fine S-Fine)	STD	STD
003 Original (HOME)	(Text Txt/Pht Photo)	Text	Text
004 Stamp (HOME)	(Off On)	Off	Off
005 Memory (HOME)	(Off On)	On	On
006 Dialing Method	(Tone Pulse)	Tone	Tone
007 Header Print	(Inside Outside No Print)	Inside	Inside
008 Header Format	(Logo ID From To)	Logo ID	Logo ID
009 RCV'D Time Print	(Invalid Valid)	Invalid	Invalid
012 Comm Journal (HOME)	(Off Always Inc Only)	Inc Only	Inc Only
013 Auto Print JRNL	(Invalid Valid)	Valid	Valid
014 File Accept Report	(Invalid Valid)	Invalid	Invalid
017 Receive Mode	(Manual Auto)	Auto	Auto
022 Substitute RCV	(Invalid Valid)	Valid	Valid
024 Print Reduction	(Fixed Auto)	Auto	Auto
025 Reduction Ratio	(70% 100%)	100%	100%
028 Polling Password		(-----)	
027 Polled File Save	(Invalid Valid)	Invalid	Invalid
028 Stamp at Memory XMT	(Invalid Valid)	Valid	Valid
031 Incomplete File Save	(Invalid Valid)	Invalid	Invalid
033 XMT Reduction	(Invalid Valid)	Valid	Valid
037 Receive to Memory		(----)	
039 PIN Code Access	(None Suffix Prefix)	None	None
042 Conf. File Save	(Invalid Valid)	Invalid	Invalid
043 Password-Transmit	(Off On)	(-----)	
044 Password-Receive	(Off On)	(-----)	
046 Select Receive	(Invalid Valid)	Invalid	Invalid
052 Diagnostic Password		(-----)	
053 Sub-Address& Password		(----------)	
054 Fax Forward	(Invalid Valid)	Invalid	Invalid
056 Cover Sheet (HOME)	(Off On)	Off	Off
069 Dial Tone Check	(Off On)	On	On
077 Department Code	(Invalid Valid)	Invalid	Invalid
079 Rotation XMT	(Invalid Valid)	Valid	Valid
082 Quick Memory XMT	(Invalid Valid)	Valid	Valid
086 Ringer Volume	(Off Soft Medium Loud)	Soft	Soft
088 List Output Tray	(Inner Outer)	Inner	Inner
095 Duplex Print	(Invalid Valid)	Invalid	Invalid
097 Special Tray No 1	(None Tray 1 Tray 2 Tray 3 Tray 4)	None	None
099 Memory Size		3 MB	
110 Fax Function Detect	(Invalid 4-Digits 5-Digits 6-Digits 7-Digits 8-Digits)	8-Digits	8-Digits
122 Dial Prefix		( )	

Richmond Hill

Municipal Office
225 East Beaver Creek Road
Richmond Hill, ON L4B 3P4
905 771 8800

Operations Centre
1200 Elgin Mills Road East
Richmond Hill, ON L4S 1M4
905 884 9613

RichmondHill.ca

RICHMOND HILL COUNCIL

To contact the Mayor and Members of Council call 905 771 8800 or email at the

Dave Barrow
Mayor
905 771 2439
rhcmayor@richmondhill.ca

Vito Spatafora
Deputy Mayor and
Regional & Local Councillor
905 771 2517
vspatafora@richmondhill.ca

Greg Beros
Councillor, Ward 1
905 771 2530
gberos@richmondhill.ca

Carmine Perrelli
Councillor, Ward 2
905 771 2549
cperrelli@richmondhill.ca

Lynn Foster
Councillor, Ward 4
905 771 2480
lfoster@richmondhill.ca

Nick Papa
Councillor, Ward 5
905 771 2510
npapa@richmondhill.ca

Richmond Hill, where people come together to build our co

Richmond Hill is building our community based on four goals.

1 Stronger Connections 2. Better Choice 3. More Vibrant 4. Wise Mana

Access!
IN RICHMOND HILL

Assistance with Town services is available in more than 12 languages. To request information in your preferred language please visit:

Access Richmond Hill in person, email access@RichmondHill.ca or call 905 771 8800.

Richmond Hill is proud to carry these designations

This Calendar was printed by an environmental responsible process ensuring the highest standards in environmental responsibility. The calen is produced on approved paper containing no-grinding-log produced from decomposing wood. The paper is 100% post-consumer w

Goodwrench
Hurd Auto Mall
Johnston, RI
75th Anniversary
"Where you can send your friends & family!"

Test

Fax

Cisco Digital Receivers/Decoders

Documentation URLs

To learn more about your digital receiver/decoder, refer to the product literature and technical documentation online:

Installation and Configuration Guides

http://www.cisco.com/go/receivers_guides

Release Notes

http://www.cisco.com/go/receivers_release_notes

Technical References

http://www.cisco.com/go/receivers_technical_references

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http://www.cisco.com/go/receivers_licensing

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OL-28981-02

TEST FAX

PLEASE DISCARD

— Ron

FAX TEST

WONDERMARK by David Malki !
I'M TIRED OF DRINKING MY LIFE AWAY TIME TO SOBER UP AND GET BACK TO THE REAL WORLD
HONEY, I'M OFF THE SAUCE AND BACK FOR GOOD
WE HAVE TO GET THE PAPERS IN BY MORNING, OR THEY FORECLOSE ON THE HOUSE
BANKRUPTCY

QT5-B3-V01

Información adicional para usuarios españoles

■ Antes de instalar el software

Para usar en idioma español la versión del software y los manuales en pantalla incluidos en el *[Setup CD-ROM/CD-ROM de instalación]*, es necesario seleccionar Español en su configuración regional antes de instalar el software. Siga las instrucciones a continuación para realizar la configuración regional

Para usuarios de Windows 7

1 Haga clic en **Start** > **Control Panel** > **Clock, Language, and Region** > **Region and Language**

2 Haga clic en la ficha **Administrative** > **Change system locale** y seleccione **Spanish (United States)** en **Current system locale**
Cuando aparezca la pantalla **Change System Locale**, siga las instrucciones en pantalla para continuar con la configuración.
Si aparece la pantalla **User Account Control** durante la configuración, siga las instrucciones en pantalla para continuar con la configuración

Para usuarios de Windows Vista

1 Haga clic en **Start** > **Control Panel** > **Clock, Language and Region** > **Regional and Language Options**

2 Haga clic en la ficha **Administrative** > **Change system locale** y seleccione **Spanish (United States)** en **Current system locale**
Cuando aparezca la pantalle **Change System Locale**, siga las instrucciones en pantalla para continuar con la configuración
Si aparece la pantalla **User Account Control** durante la configuración, siga las instrucciones en pantalla para continuar con la configuración

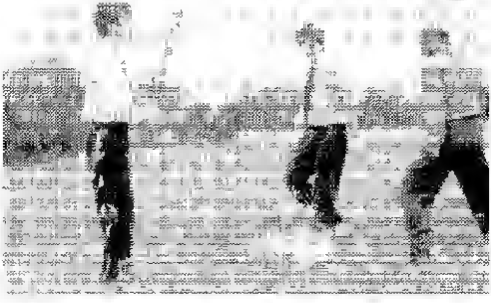
This side up

QT5-3811-V01 0720106 © CANON INC 2010 PRINTED IN VIETNAM

FAX

TEST

PLEASE, WORK...



TEST TEST TEST, from HQ

To

18553301239

Faxtoy.net

MEINFORMER
RKHAM

Test fax from Circuit ID

HP Officejet J4600 All-in-One series

Fax Test Report for
Jaime Diaz
(210) 335-6846
Dec 24 2012 4:26PM

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	Off
Rings to Answer	2
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	No Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	Off
Fax Speed	Slow (9600)
Fax Forwarding	Off

Refer to your User Guide for more information on the fax tests and settings.

Instructions on how to rerun this test
Step 1. Press the "Setup" button
Step 2. Choose the "Tools" menu
Step 3. Choose the "Run Fax Test" item

CN9BBC80FZD52T
YLM2FND004AR

ATI

Test

-BP

Promesa
BEHAVIORAL HEALTH
promoting growth and wellness...

7120 N. Marks Ave. Suite 110
Fresno, California 93711
(T) 559-439-5437
(F) 559-439-5411

Fax Cover Sheet

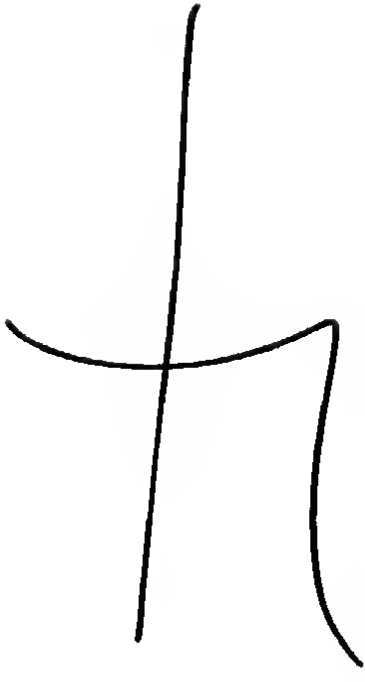
Sender: Vanness	Sender Fax #: 2687613
Recipient: Adventist Health	Recipient Fax #: 6454540
Number of Pages: 2	Date:
Regarding: William Fox sports physical	
Notes: William Fox DOB- 9 10 02	

CFG
108 Main street BALTIMORE, MD 21234-9090
Business (410) 689-9860 Business Fax (410) 689-9863 E-Mail erte@myorganzation.com

VISIT Note 2/23/2012

Patient: Jake Adams **MRN** 0605150007
DOB 1/3/2007 **Gender:** FEMALE **SSN** XXX-XX-XXXX **RACE:** WHITE

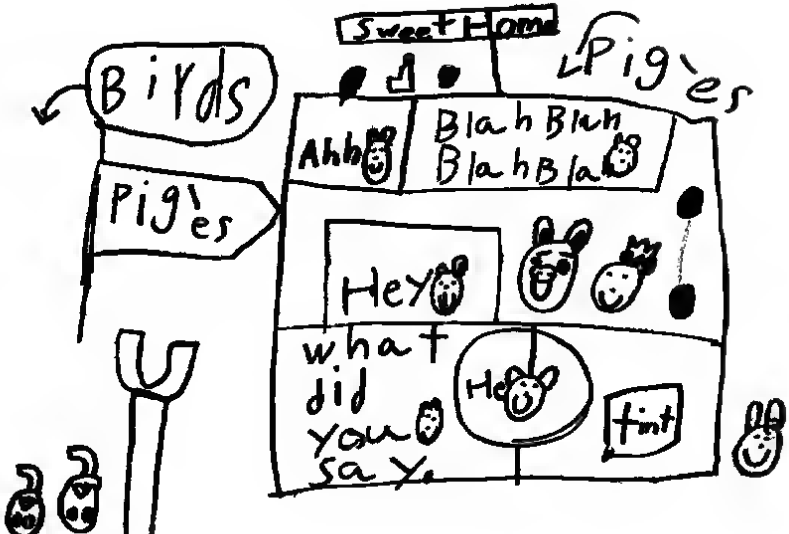
Test fax from Circuit ID

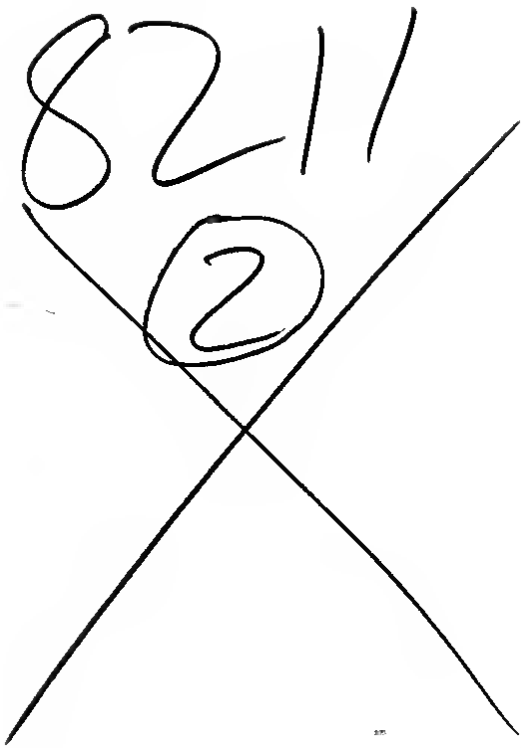


NO

FAX

YSBC


Sweet Home
Birds
Pigs
Pigs
Ahh
Blah Blah
Blah Bla
Hey
what
did
you
say
Hey
tint


8211
2

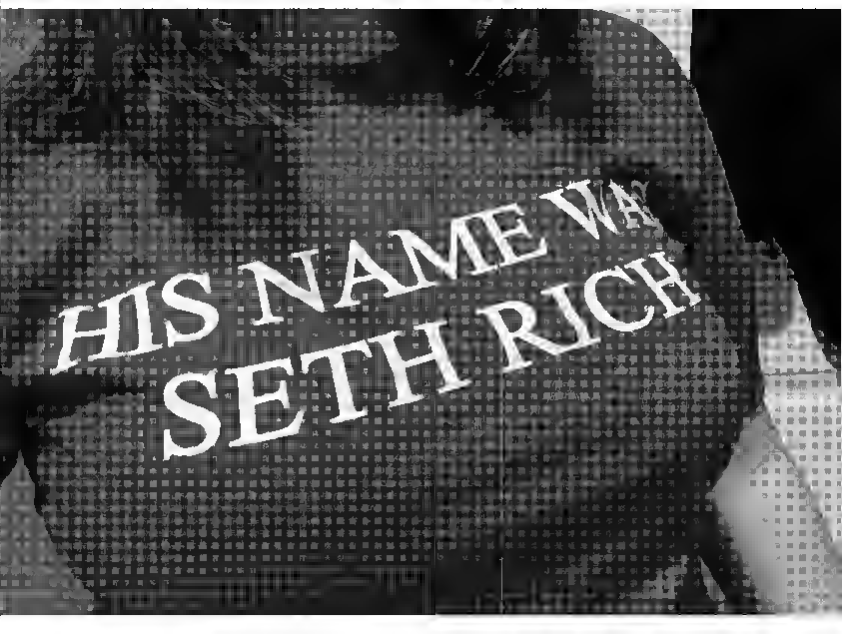
$T_{55}(t)$

$T_{15}(t)$

$T_{01}(t)$

Test Fax from Westley

TION FROM


HIS NAME WA
SETH RICH

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FREAK
BROTHERS

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See how VeriSign® SSL delivers a higher level of protection than the competition.

These features are included FREE with VeriSign SSL.	VeriSign Secured	Other Security Providers
Fully Authenticated SSL Certificates	Yes	Maybe
Most Trusted Seal	Yes	NO
Seal-in-Search™	Yes	NO
Website Malware Scanning	Yes	NO
Vulnerability Assessment	Yes	NO
Dedicated Security Advisor	Yes	NO
Free 24/7 Technical Support	Yes	Maybe

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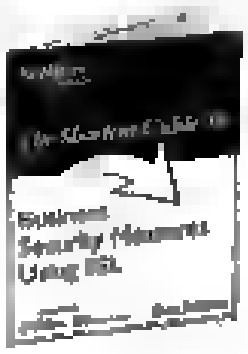

***The Shortcut Guide to Business Security Measures Using SSL* will show you how to**

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- Create a stronger business-centric security management strategy
- Implement best practices for continued data security
- Utilize SSL solutions to help migrate evolving information security threats

Visit www.verisign.com/promo/TJOOD now or scan the QR code with your barcode app!

The first 250 to respond will receive a FREE 8GB USB flash drive.*

Call 1-866-893-6565 or 1-650-426-5112, option 3, to speak with a security specialist and find out how SSL certificates can protect your business.

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Included with Secure Site Pro and Extended Validation SSL Certificates.

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Test

HP Photosmart 7520 Series

Fax Test Report for
Leland Bisbee
4804836585
Jan 06 2016 1:24PM

Fax Hardware Test	**PASS**
Fax Connected to Active Telephone Wall Jack	**PASS**
Phone Cord Connected to Correct Port on Fax	**PASS**
Using Correct Type of Phone Cord with Fax	**PASS**
Dial Tone Detection	**PASS**
Fax Line Condition Test	**PASS**

Your HP device has passed the fax test

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	Off
Rings to Answer	5
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Fax Speed	Medium (14400)
Fax Forwarding	Off

Refer to your User Guide for more information on the fax and settings.

Instructions on how to rerun this test.
Step 1. Press the "Fax" button
Step 2. Choose the "Settings" menu
Step 3. Choose the "Fax Tools" item
Step 4. Choose the "Run Fax Test" item

CN3544B1QY05YY

ELM1CN1434BR

Go Commando!

WON'T

YOU BE

MY

NUMBER 2

???

DUMMY FAX DOCUMENT

NO CONTENT HERE

Applied Diagnostics
[illegible] Carlos Drive, St. [illegible] Houston, Texas 77043
TEL 713.[illegible] FAX 713.[illegible]
Toll Free 888-ADX-TEST (888-239-8378)

Electronic Signature

[illegible] O'Hara—DO

[illegible]

[illegible]

[illegible]

[illegible]

TEST

Fab

HP Officejet 5800 series 5810 Personal Printer/Fax/Copier/Scanner

Log for
Nex Crystal
818 345-8178
Jun 03 2013 9:53a

Last Transaction

Date	Time	Type	Identification	Duration	Pages	Result
Jun 03	08:52a	Fax Sent	18888771855	0:00	0	No answer

Biocept
Completing the Answer™

Target Selector™

Biocept, Inc.
5810 Nancy Ridge Drive Suite 150
San Diego CA 92121

Veena M. Singh MD, FCAP FACMG
Laboratory Director
CLIA ID Number: 05D1079988

Patient Information

Patient Name	Fausto Allin
Patient ID#	11021
Address:	6662 Buckingham SUMJ 08058 734-512-7845
Date of Birth:	08/11/1966 Sex: Male
Diagnosis:	

Client Information

Ordering Physician:	Doctor Dave M D.
Order Location	Hoag Facility 1
Address:	1200 Newport Center Drive Unit 6, Newport Beach CA 92614
Account Number	2662
Phone	949-535-5866
Fax:	N/A

Specimen Information

Accession#	17560	**Collected Date**	11/08/2016 12:00 AM
Client Accession#		**Received Date/Time:**	11/26/20 II 12:00 AM
Specimen Type:	Blood	**Reported Date/Time:**	11/26/2016 08:31 AM
Volume(N/A):		**Test(s) Ordered**	BRAF Mutations

Results

BRAF Mutations NOT DETECTED

Plasma Volume Used: 4 ml

Method Target Selector ™ by Biocept

Positive and negative controls were run and counted in an appropriate manner
The BRAF products assay is a quantitative Real-Time PCR based mutant enrichment assay with selective blocking of BRAF wild-type amplification. The amplification products are purified and subject to sequencing to purified the presence of the BRAF mutation. The assay has a sensitivity of 0.05% mutant population.

Electronically Signed by: 11/26/2016
Veena Singh, MD Pathologist

© 2016 Biocept,Inc. All rights Associst
AAA1000AA

VOUCHER CODE = CI10

- Visit Phase One's aStore
- Select Capture One Pro
- Add the desired version purchese/upgrade to the Cart
- Enter 'voucher claim code' (CI10) to claim your 10% Discount
- You will receive a license code immediately upon credit card approval

you + hp

FaxBack System Test

[illegible]ou.com/passing.hp

Other useful hp web sites

www.hp.com/register
Use this web address to register your HP product

www.hp.com/support
Use this web address to obtain product support for your product

www.hpshopping.com
Use this web address to order supplies and accessories for your HP product

Help us help you

We're interested in your feedback on the fax verification process. Send your comments to

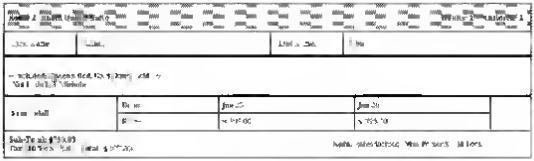
fax.feedback@hp.com

Hello World

invent

© 2004 Hewlett-Packard Development Company, LP

www.hp.com



Cancellation Policy
We know [illegible] Please [illegible] at least [illegible] before [illegible] If you cancel [illegible] cancellation fee. If you cancel [illegible] 24 hours [illegible] 50% of the [illegible] Please [illegible] we [illegible] to show up, as we have charges [illegible] if we [illegible] can fill [illegible] time slot [illegible] We really [illegible] but [illegible] It [illegible]

Send the signed application by mail to
LUMID
The Department of Social and Economic Geography
Sölvegatan 12
223 62 Lund
SWEDEN

INFORMATION REGARDING THE SELECTION OF STUDENTS

Approximately 40 students will be admitted for the September 2007 intake. The final selection among the applicants fulfilling the specific prerequisites for LUMID is based on academic degrees and grades, the statement of purpose written by the applicants, and the recommendations given. As LUMID wishes to create an interdisciplinary and international learning environment, the programme takes into consideration where (from what country) applicants have completed their previous education and the academic subject background of the applicants, when making the final selection into the programme.

***** ERROR TX REPORT *****

TX FUNCTION WAS NOT COMPLETED

TX/RX NO	2692
RECIPIENT ADDRESS	[illegible]
DESTINATION ID	
ST. TIME	05/12 15:00
TIME USE	00'37
PAGES SENT	0
RESULT	NG

6 My child bosses others	1	2	3	4	5
7 My child complains about things not being fair	1	2	3	4	5
8 My child shows respect for others.	1	2	3	4	5
9 My child expresses affection toward me	1	2	3	4	5
10 My child blames others for his/her own mistakes	1	2	3	4	5
11 My child likes him/herself	1	2	3	4	5
12 My child says hurtful things to me	1	2	3	4	5
13 My child expresses anger in an appropriate manner	1	2	3	4	5
14. My child talks with me about alcohol and other drugs.	1	2	3	4	5

Test fax from Circuit ID

Hi

Evon

[illegible] Error Report (Send) [illegible]

Send job resulted in error

Job No.	1543
Address	8613331239
Name	
Start Time	05/15 01 58 PM
Call Length	00 00
Sheets	0
Results	NG
	06 8 Busy/No Signal

UND-TEST-FAX

Wuh ⊕ 1

UBIQUITI NETWORKS

PicoStation5

Limitless Applications

PicoS DATASHEET

SYSTEM INFORMATION	
Processor	Atheros MIPS 24Kc
Memory / Storage	16MB RAM, 8MB Flash
Networking Interface	1x10/100 BASE-TX (Cat. 5, RJ-45) Ethernet Interface

REGULATORY / COMPLIANCE INFORMATION	
Various Models Available	FCC Part 15.247, IC RSS210, CE
RoHS Compliance	Yes

RADIO OPERATING FREQUENCY 5.275-5.825GHz						
TX SPECIFICATIONS				RX SPECIFICATIONS		
	DataRate	Avg. Power	Tolerance		DataRate	Sensitivity	Tolerance
802.11a OFDM	6Mbps	22 dBm	+/- 1.5dB	802.11a OFDM	6Mbps	-94 dBm	+/- 1.5dB
	9Mbps	22 dBm	+/- 1.5dB		9Mbps	-93 dBm	+/- 1.5dB
	12Mbps	22 dBm	+/- 1.5dB		12Mbps	-91 dBm	+/- 1.5dB
	18Mbps	22 dBm	+/- 1.5dB		18Mbps	-90 dBm	+/- 1.5dB
	24Mbps	22 dBm	+/- 1.5dB		24Mbps	-86 dBm	+/- 1.5dB
	36Mbps	20 dBm	+/- 1.5dB		36Mbps	-83 dBm	+/- 1.5dB
	48Mbps	19 dBm	+/- 1.5dB		48Mbps	-77 dBm	+/- 1.5dB
	54Mbps	17 dBm	+/- 1.5dB		54Mbps	-74 dBm	+/- 1.5dB

ANTENNA & RANGE PERFORMANCE	
RP-SMA Connector Included	Outdoor Omnidirectional
Indoor/Outdoor Range	Over 200m, 500ft

PHYSICAL / ELECTRICAL / ENVIRONMENTAL	
Dimensions	15.2cm Length x 5.1cm Height x 3.7cm
Weight	0.1kg
Enclosure Characteristics	Outdoor UV Stabilized Plastic
Max Power Consumption	4 Watts
Power Rating	Up to 24V
Power Method	Passive Power over Ethernet (pairs 4,5+, 7,8 return)
Operating Temperature	-20C to +70C
Operating Humidity	5 to 95% Condensing
Shock & Vibration	Meets 3G, 10-150 Hz

SOFTWARE
AirOS
visit www.ubnt.com/airos

Test fax from Chris at Brightworks
The quick brown fax jumps over the lazy dog
000
111
222
333
444
555
666
777
888
999
000
ABCDEFGHIJKLMNOPQRSTUVWXYZ
abcdefghijklmnopqrstuvwxyz

Fax

Wymore

TEST #2

11/15

Lancaster County Podiatry

To

Company	
Fax number	18566771655
From	Lancaster County Podiatry
Company	Lancaster County Podiatry
Fax number	717 733 2212
Business phone	717 733-2251
Home phone	717 733 2251
Address	

Date & Time	8/3/2011 11:29:34 AM
Pages	1
Re	

This facsimile transmission is intended only for the use of the individual or entity to which it is addressed and may contain confidential information belonging to the sender wh ch is protected by law and/or by the practitioner-client privilege. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or taking any action in reliance of the contents of this information is strictly prohibited. If you have received this transmission in error.

HP OfficeJet Pro 6978 All-in-One Series

Fax Test Report for
c Faimjan
2034697878
Nov 01 2017 11:34

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Noise Test	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	Off
Rings to Answer	5
Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Speed	Medium (14400)
Fax Forwarding	Off
Connection Problem Redial	Redial

Refer to your User Guide for more information on the fax test and settings

Instructions on how to rerun the test:

Step 1. Press the "Fax" button
Step 2. Choose the "Setup" menu
Step 3. Choose the "Tools" menu
Step 4. Choose the "Test" menu

TH658320DH

MCP2CN1716AR

Test Fax

Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Xerox WorkCentre 5325 PCL6 on RSC-ENWKFS1.

The information below describes your printer driver and port settings.

Submitted Time	12/25/04 PM 6/2/2013
Computer name	RSC-ENWKFS1
Printer name	RTPPRINT325
Printer model	Xerox WorkCentre 5325 PCL6
Color support	No
Port name(s)	TP_10.70.141.?
Data format	RAW
Share name	RTPRRINT325
Location	Suite 325
Comment	RTPPRINT325
Driver name	UNIDRV.DLL
Data file	XGSANXWH.gpd
Config file	UNIDRVUI.DLL
Help file	UNIDRV.HLP
Driver version	6.00
Environment	Windows NT x86

Additional files used by this driver:

C:\Windows\system32\spool\DRIVERS\W32X86\3\XGSANXWH.gpd (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\XGSANXWH.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZupHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZrmCHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZmtTuHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZquHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZrermHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZutrlHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZrmuHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZcomsHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZjpuiHM.exe (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZptzcHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZfpuiHM.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZtxtHM.cab
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZGSaHM.cab
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZfpCHM.exe (5230, 500, 0, 0)
C:\Windows\system32\DRIVERS\W32X86\3\x1Theay.dll
C:\Windows\system32\spool\DRIVERS\W32X86\3\xZfp002.dll (5230, 500, 0, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\UNI36ui.DLL (6.1.7600.16385 (win7_rtm.090713-1255))
C:\Windows\system32\spool\DRIVERS\W32X86\3\STRNAMES.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\SJNULTYPE.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\STRESCHEN.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\SJDSCHRX.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\TTPSUB.GPD
C:\Windows\system32\DRIVERS\W32X86\3\LOCALE.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\PCLXL.DLL (6.0.5429.0 (vb_rcp_d2_drivers.090626-2239))
C:\Windows\system32\spool\DRIVERS\W32X86\3\PCLXL.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\PSCRIPT.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\PJL.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\PRTCAP.GPD

Test Fax From Shannon

FUCK
this
Shit

AMERICANEAGLE

drill-target within the 167

Billion Formation. Keep reading to see why AMZG is

Pumping American Oil and Delivering Stock Profits to individual investors just like you!

855 330 1239

Test

BASIC
ENERGY SERVICES

P.O. BOX 840
KERMIT, TEXAS 79745
TELEPHONE (432) 586 2588
FAX (432) 586 2900

CUSTOMER [illegible] Energy
ADDRESS

LEASE N/B [illegible]
WELL NO 6
DESTINATION

CONTRACT NO.
A.F.E. NO
TRUCK NO 18717 TRAILER NO 21804
COUNTY Loving
LEASE NO

COUNTY DISPOSAL TICKET NO

DESCRIPTION OF SERVICE Arrived on location standby [illegible] [illegible] to [illegible] [illegible] rods [illegible] pumped 20 bbls of fresh [illegible] through tubing to pressure [illegible] [illegible] [illegible] pump [illegible] pressure [illegible] [illegible] [illegible]

LEAVE YARD 3:00pm
ARRIVE YARD 8:00pm

ORDERED BY Jim 553-7850

		TIME	RATE	AMOUNT
DRIVER	[illegible]	5.5	$90.00	$495.00
DRIVER	55260			
WATER Freshwater	20 bbls		$1.00	$20.00
DISPOSAL FEE				
MISC				
MISC				
SALES TAX				
			TOTAL	$515.00

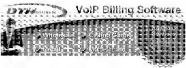
DATE 11-6-15

THANK YOU!

AUTHORIZED SIGNATURE

Hi

TAKE 2



VoIP Billing Features - Class 4/5

Customer Management

- Create unlimited number of customers
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]

International Rating

- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- Unlimited rate sheets
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]

Customer Web Portal

- [illegible]
- [illegible]
- [illegible]
- [illegible]
- Online signup for new customers

Usage and Profit Reporting

- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]

RADIUS

- [illegible]
- [illegible]
- [illegible]

www.dthbilling.com sales@dthsoftware.com Tel +1 613-822 1597 Toll Free: 1 888 688 5450

Wednesday September 30, 2015

For: Bella Monterey travelodge
Fax: 1(650) 330-3239
Attn: Monterey Travelodge
Subject: Booking Confirmation

Reservation Confirmation
0SA67149-1380-317
Created: 09/29/2015 08:41:00 GMT
Booking Source: Standard Rate

Dear Monterey Travelodge,

We have received the following booking from the travel agent or agency mentioned below. Please check and confirm availability.

Thank you
Hotel Direct

Guest Information

Booker Name	Jojin Ofgiffg	Id No	485345
Address	345345	Zip Code	485345
City	85345	Country	ARGENTINA
Email Address	krishnakant.pramod@mywebsite.com	Telephone Number	4853451453545

Payment Information

Card Type	Visa	Expiry Date	03/2015
Card Number	4984242626824842	Card Holder Name	324284
		Credit Note	879.20

Reservation Details

Number of Guests	1	Number of Rooms	1
Check In Date	September 29 2015	Check Out Date	September 30 2015

Booked Hotel Name Monterey Travelodge

First Name	Jojin	Last Name	Ofgiffg

Room Rental	Date	Sep 29
	Rate	872.00

Sub-Total: 872.00
Tax (10.00%) = Total: 879.20

Rates Valid in the Currency of the Hotel Published Rates
Reservation ID: 0SA67149-1380-317 Go to Basic

Cancellation Policy

Cancellations must be received by the hotel at least 24 hours prior to the scheduled arrival time. Otherwise, the guest will be charged for one night's room and tax. Reservations are guaranteed for late arrival. If the guest does not show up and has not cancelled by the cancellation deadline, the guest will be charged for one night's room and tax.

Page Counter

Serial No C718M510093
Data of Today Jun. 14,2018 02:12 PM

Copier:Color	42
Copier:B & W	49
Printer:Color	0
Printer:B & W	0
Color Total	42
B & W Total	49

TEST

Thursday April 23, 2015

Reservation Confirmation
4953980-979 289
Created: 04/23/2015 05:08:16 GMT
Booking Source: PWS

For You: Bejo SHALU BEAR INN HOTEL SUITS
From: +1(925)-330-3289
Attn: Ajesh Chandran
Regional Booking Call Center

Hi Ajesh Chandran

Thank you for booking with Expedia. We look forward to serving you. If you have any questions regarding your reservation, please contact a Customer Care Agent at 1-800-397-3342 or visit us at www.expedia.com.

Your Trip to
BRIGHTON

Important Info...

Below you will find a receipt for the purchase you made with Expedia. Please review it carefully to ensure that all of the information is correct.

Expedia ID:	Test account	Name:	Bejo
Address:	Address	Zip Code:	PostalCode
City:	City	Country:	OTHER
Email Address:	bookcentre@expedia.com	Telephone Number:	13464883

Payment Information

Credit Card:	Master Card	Expiration:	11/2020
Credit Number:	5433614355135415	Security Code:	
		Grand Total:	$97.90

Booking Details

Number of Rooms:	1	Number of Nights:	1
Check-In Date:	April 25, 2015	Check-Out Date:	April 26, 2015

Room 1 - Standard Queen Room (Non-Smoking) - Adults: 2 - Children: 0

First Name:	Test	Last Name:	Ajesh

Stay Dates:	Date:	Apr 25
	Rate:	$97.45

Sub-Total: $97.45
Tax (12.00%): $9.85 Fees ($5.80) = Total: $110.90

Note: Resort and Property Fees

Special Request: Expedia Booking ID:2137443
Non-Smoking Room, Primary Traveler Adult Test 2 of 3 Guests, 2 double beds Hotel Collect Booking Collect Payment From Guest Non-Smoking

Important Information About Your Reservation

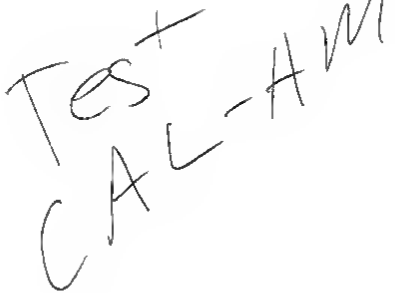
55.231

Test Scan

1 888-877-1055

CM
2

TEST
FAX


TEST
CAL-AM

limited demonstrational version
Please visit http://www.sf-soft.de for more information
limited demonstrational version
Please visit http://www.sf-soft.de for more information
limited demonstrational version
Please visit http://www.sf-soft.de for more information
limited demonstrational version
Please visit http://www.sf-soft.de for more information

FAX
TRANSMISSION

To:

From: Yamaha

Subject: testing

Message: Please ignore
—
fff

Company Name
Address
Tel/ Fax
Email /website

This fax was sent by GFI FaxMaker for Exchange

This fax was sent with GFI FaxMaker fax server. For more information, visit: http://www.gfi.com

A [illegible] ladder leans against a [illegible] building. The ladder is 20 feet long. The bottom of the ladder is pulled away from the building at a rate of [illegible] feet per second.

(a) How fast is the top of the ladder moving down the side of the building when the top is 12 feet above the ground?

(b) How fast is one angle of the triangle formed by the ladder, building, and ground changing then? (Hint: You will need the value found in part (a).)

(c) At what rate is the area of the triangle formed by the ladder and the ground changing then?

b. Let $f(x) = \sin^{-1}(\frac{x}{2})$

(a) Find the derivative of $f(x)$, $f'(x) = ?$

(b) Use your linearization to approximate $\sin^{-1}(1)$

Mail

COMPOSE

Inbox

Starred

Sent Mail

Drafts (1)

Completed ServiceNo...

GCN-Notify

HO Shift Handoff

New Assignments

ServiceNow SLA Brea

ServiceNow Updates

More

Sade

Ulysses Sanchez
Mmmk TN

Jaymish Ram
You' re problem

Allen Zhang
thank you

Tony Chung
See you then

Ryan Farmer
You that should work

RIT West
27 Will. Keep trailing

Jeehen Kelnknesht
You re wonder let me

Sarah Sparlebe
You will give that a try

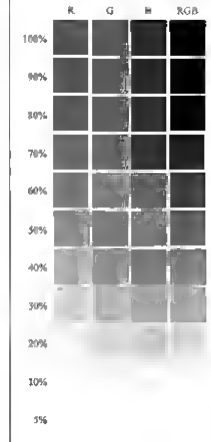
Noel Alegado
You ReaFFJ44st2L

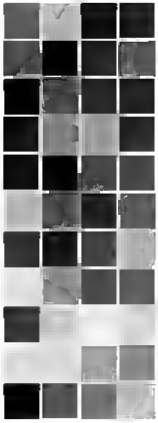
Shreya Oswal
You: Hi Shreya I got ac

Test

test

Test Page





The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the laz
The quick brown fox jumps over th
The quick brown fox jumps ove
The quick brown fox jump

DUMMY FAX DOCUMENT

NO CONTENT HERE

Setup for Fax Reception

Read this manual after finishing the operation of **Getting Started**
To use the fax features of the machine, you can enter the fax settings through the **Easy setup**.

Using Easy setup

Press the **MENU** button, then select in the order of **Setup** > **Device settings** > **FAX settings** > **Start Easy setup** or **Easy setup** > **OK** button or **Start setup**.

Use the ▲▼◀▶ button to select the item, then press the **OK** button.

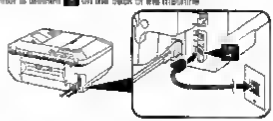
Easy setup starts up.
Follow the on-screen instruction to complete the settings in accordance with the operating environment.

Complementary Information about Fax Setting Using Easy setup

Connect to a Telephone Jack

Connect the machine to a telephone jack with the supplied telephone line cable.

The connector is labeled on the back of the machine.



- A basic connection method is shown in this figure. For other connection methods, refer to the Online Manual.
- Users in Europe: If you prepare your own telephone line cable, be sure it is a 6-wire telephone line cable.

SAVE 50%-60%
THROUGHOUT THE STORE
PLUS TAKE UP
TO AN EXTRA
40%
OFF
A LARGE SELECTION OF SALE &
CLEARANCE ITEMS WITH YOUR
MYSTERY
MONEY CARD
bloomingdale's

test fax from Circuit ID

TESTNAME = DAX

TEST FAX

ICTFAX

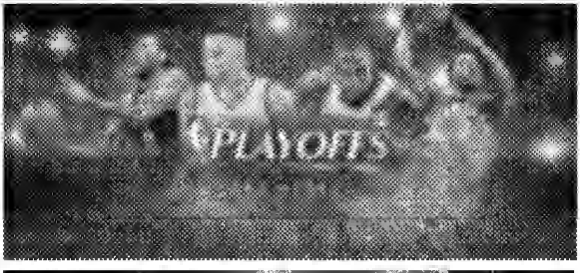
http://www.ictfax.org/

ICT Innovations
http://www.ictinnovations.org

Test

Sum

1-2-3


PLAYOFFS

PLAYOFFS

test from me

FAX COVER

GREENBRIAR AUTO & FRAME	NAME All State Insurance
FAX NO [redacted] (478) 701 6658	FAX NO (866) 600-8946
THOMAS [redacted]	ATTN Brian Curry
SUBJECT Claim #: 0001764244971001 Supplement	

Test

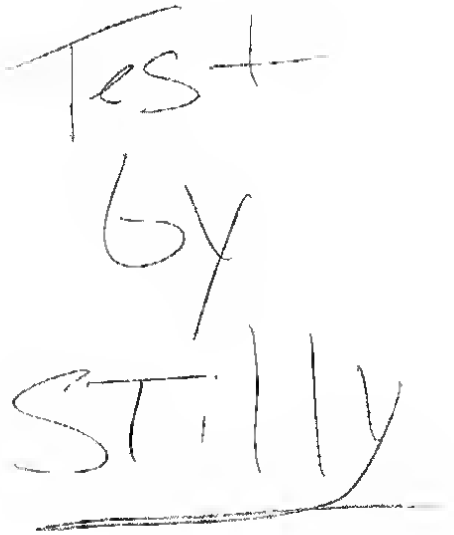
Test

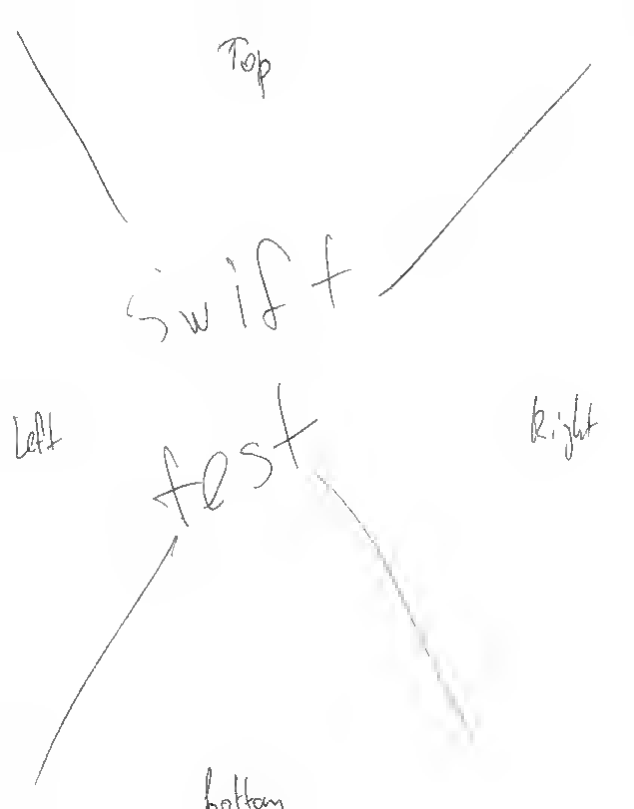
Test

Test

Test

test


Test
by
Stilly


Top
Swift
Left
test
Right
bottom

Transmission Report

Date/Time	01-17-2017	01:34:46 p.m.	Transmit Header Text	
Local ID 1	3194829999		Local Name 1	Line 1
Local ID 2			Local Name 2	Line 2

This document : Failed
(reduced sample and details below)
Document size : 8.5"x11"

Total Pages Scanned : 1 Total Pages Confirmed : 0

No.	Job	Remote Station	Start Time	Duration	Pages	Line	Mode	Job Type	Results
001	921	2192942948	01-17-43 p.m. 01-17-2017	00:00:00	0/1	N/A	---	HS	TU

Abbreviations:

HS: Host send	PL: Polled local	MP: Mailbox print	TU: Terminated by user	G3: Group 3	
HR: Host receive	PR: Polled remote	CP: Completed	TS: Terminated by system	EC: Error Correct	
WS: Waiting send	MS: Mailbox save	FA: Fail	RP: Report		

FAX
TRANSMISSION

LONE STAR CREDIT UNION

800.LUV MYCU (588.6928) LoneStarCU.org

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From: LSCU
Subject: test Wednesday

Message:
Test

Regards,

Kelly Cunningham | Information Systems Manager
Lone Star Credit Union
(o) 214.217 8287
(f) 214 420 3502
kcunningham@lonestarcu.org

www.LoneStarCU.org

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2500 Rocky Mtn. Ave. Suite 360
Loveland, CO 80538
(970)669-0470

800 East 20th Street
Suite 320
Cheyenne, WY 82001
(307)634-8388

Date Wednesday February 09 2011
To Test from miles
From Miles Kallbum
Message/Notes test

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A Catalog for Digital Artists & Designers

November 1996–January 1997

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TEST

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FAXTOY.NET

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August 23 2009

Text only

Thx

mk

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July 29, 2013 | 3,606 | 4 | this guide helpful? | Report | Share:

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There for software will work on any fax machine, or any type of fax software including FaxTalk.

Testing fax sending only

A valid 10-digit U.S. & available fax will allow you to send a fax test. Send a fax to: [redacted] 1-888-870-1655 or [redacted] 208-386-[redacted] (United States USA)

NOTE: Faxes sent to this number a publicly displayed for all to see on the Web site history.net — the Just like any numbers, unaffiliated or offensive number

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Tags: fax, online, test, free, [redacted], send, receive, machine, number

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Join us for the Opening Reception
The Digital Artistry of Don Lambert
Friday, May 11 from 5 - 8 p.m.

The Digital Artistry of Don Lambert **Digital Artistry** is an apt name for the artwork created by Don Lambert. Using a number of different computer software programs, a computer painting stylus and a pressure sensitive tablet, Lambert takes his original photographs and creates something truly unique. Lambert takes the original photo images, enhances and adds to them in one computer program and then digitally paints them in another. "It's certainly going to be different from what people have seen before." This is Lambert's first show in 33 years.

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Fax Transmission

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123

Booking.com

Booking Confirmation

BOOKING NUMBER 966.206 014 PIN CODE 7316

Holiday Inn Athens Attica Av, Airport W (Holiday Inn Athens Attica Av Airport W)

Address: 40.2 km Attica Avenue, Peania, 19002, Greece
40.2 χλμ Α' οδός Αττικής, Παιανία, 19002, Ελλάς
Phone: +302106886000
GPS Coordinates: 37.97° 58' 27"N, 23° 52' 5"E

CHECK-IN	CHECK-OUT	ROOMS	NIGHTS	TOTAL PRICE
10 MAY Sunday From 2:00 PM Until AM	**11** MAY Monday From 6:00 AM Until PM	1	1	approx. **$126** You'll pay in the hotel's currency: € 117

The displayed amount (in USD) is indicative and based on the exchange rate at the time of booking.

1 room
2 adults, 0 children
0.00 % city tax is included.

Standard Room

Address: Attica Excl.Airport, Per max. 1 person
Non-smoking Breakfast costs € 17 per person per night
Tea/Coffee maker · Hair dryer · Mini-bar · Safe · Telephone · Air conditioning · Bathrobes · Walk-in shower · Bath/shower combination · Bidet · Toilet · Bathroom · Heating · Satellite channels · Iron · Iron/ironing board · Radio · Desk · Free toiletries · Toilet · Bathroom · Heating · Satellite channels · Iron · Iron/ironing board · Radio · Desk · Free toiletries
Extra bed(s): Max (21-99 inches/ages) 1 · Min (35-99 inches/ages) 1

Prepayment
The total price of this reservation may be charged anytime after booking.
Cancellation costs: € 117
This reservation cannot be cancelled free of charge.

Hotel policies

Onsite parking
- Free public parking is available on site (reservation is not needed)

Internet
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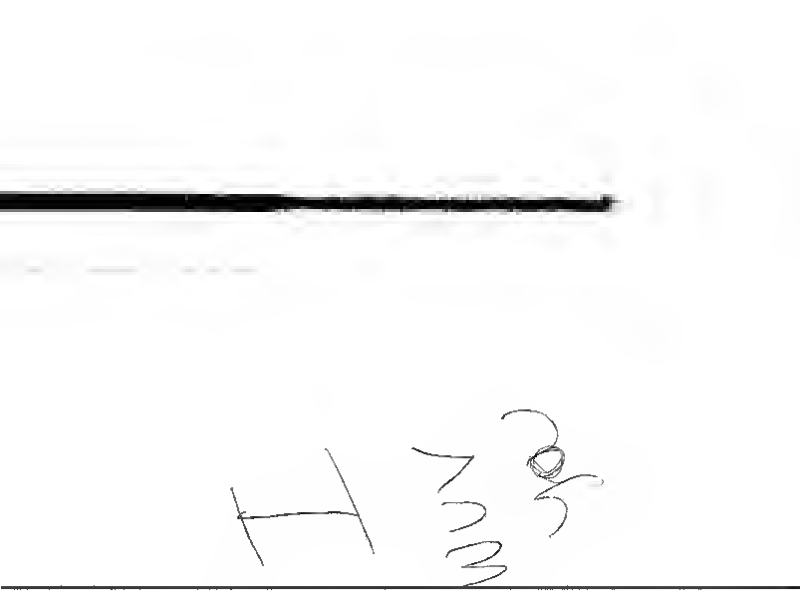
Table 2-3 Some Functional Groups

Compound class	General structure*	Functional group	Example
Alkanes (Chapters 3–4)	R—H	None	$CH_3CH_2CH_2CH_3$ **Butane**
Haloalkanes (Chapters 6–7)	R—X (X = F, Cl, Br, I)	—X	CH_3CH_2—Br **Bromoethane**
Alcohols (Chapters 8, 9)	R—OH	—OH	$(CH_3)_2CH$—OH **2-Propanol (Isopropyl alcohol)**
Ethers (Chapter 8)	R—O—R	—O—	CH_3CH_2—O—CH_2 **Methoxyethane (Ethyl methyl ether)**
Thiols (Chapter 9)	R—SH	—SH	CH_3CH_2—SH **Ethanethiol**
Alkenes (Chapters 11–12)	(H)R, R(H)	C=C	CH_3, CH_3 **2-Methylpropene**
Alkynes (Chapter 13)	(H)R—C≡C—R(H)	—C≡C—	$CH_3C{\equiv}CCH_3$ **2-Butyne**
Aromatic compounds (Chapters 15–16, 22)	R(H), (H)R, R(H), R(H), R(H)		CH_3 **Methylbenzene (Toluene)**
Aldehydes (Chapters 17–18)	R—C(=O)—H	—C(=O)—H	CH_3CH_2CH **Propanal**
Ketones (Chapters 17–18)	R—C(=O)—R	—C(=O)—	$CH_3CH_2CCH_2CH_2CH_3$ **3-Hexanone**
Carboxylic acids (Chapters 19–20)	R—C(=O)—O—H	—C(=O)—OH	CH_3CH_2COOH **Propanoic acid**
Anhydrides (Chapters 19–20)	R—C(=O)—O—C(=O)—R(H)	—C(=O)—O—C(=O)—	$CH_3CH_2C(=O)OC(=O)CH_2CH_3$ **Propanoic acid anhydride**
Esters (Chapters 19–20, 22)	(H)R—C(=O)—O—R	—C(=O)—O—	$CH_3CH_2C(=O)OCH_3$ **Methyl propanoate (Methyl propionate)**

*The letter R denotes an alkyl group (see text). Different alkyl groups can be distinguished by adding primes to the letter R: R′, R″, and so forth.

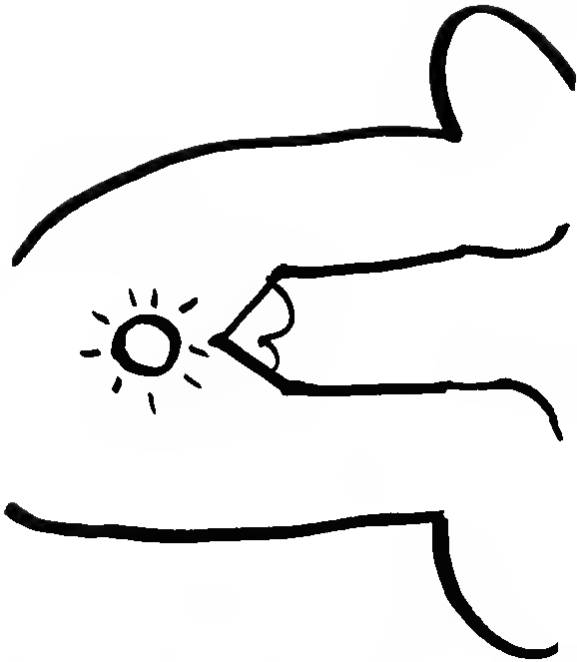


this is a test

Device Settings

Kalus Settings

TIME	VALUE (mg/dL)
12:00 am - 12:00 am	90-120



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Nashville

1888 877 1655

1503200 1300

$$\frac{1}{\sqrt{3}} \quad \frac{1}{\sqrt{5}+1}$$

WF-3640

EPSON
EXCEED YOUR VISION

Fax Diagnostic Report

PAGE 001/001
2016 12 31 11:34 AM

Name

Fax

Check Items

1	Product Hardware Check	PASS
2	Phone Cable Connection Check	PASS
3	Connection Port Check	PASS
4	Phone Line Connection Quality Check	PASS
5	Dial Tone Detection	PASS

Status :

The fax connection is OK

Test #1

Sound Check

Facsimile Transmission Cover Page

Subject

To: hp

From:

Date: 11/18/2011

Time: 9:09 PM

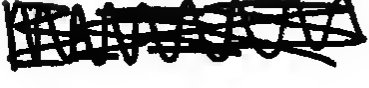
Fax Number. 1-888-877-1655

Pages in Fax. 2

[ ]Urgent [ ]For Review [ ]Please Comment [ ]Please Reply [ ]Please Recycle

FX

TEST 1



Service Center Fax No.			
Device Name	KM_C456e		
Total Counter	00405670	Total Duplex Counter	00029363
No. of Originals	00404531	No. of Prints	00374006
No. of Printed Sheets	00403369		

		Total		Color
Copy				
	Total	0191060		0000151
	Black	0179848		0000065
	Full Color	0011220	[6]	0000086
	Single Color	0000000		0000000
	2 Color	0000000		0000000
Print		Total		Color
	Total	0194815		0002145
	Black	0134325		0001578
	Full Color	0060476	[7]	0000567
	2 Color	0000014		0000000
Total (Copy + Print)	Total	0385875		
	Black	0314165	[1]	
	Full Color	0071696	[3]	
	Single Color	0000000	[4]	
	2 Color	0000014	[5]	

Scan/Fax		Total		Color
	Black	0019795	[2]	0000005
	Full Color	0000000	[8]	0000000
	Scans	0018355		0000035
	Fax TX	00003207		
	Fax RX	00018199		
		OCR Name		With OCR
	Number of OCR originals	0000000		0000000
	OCR Sending Number of Sheets	0000000		0000000
	OCR Sending Number of Files	0000000		0000000

Total		0405670
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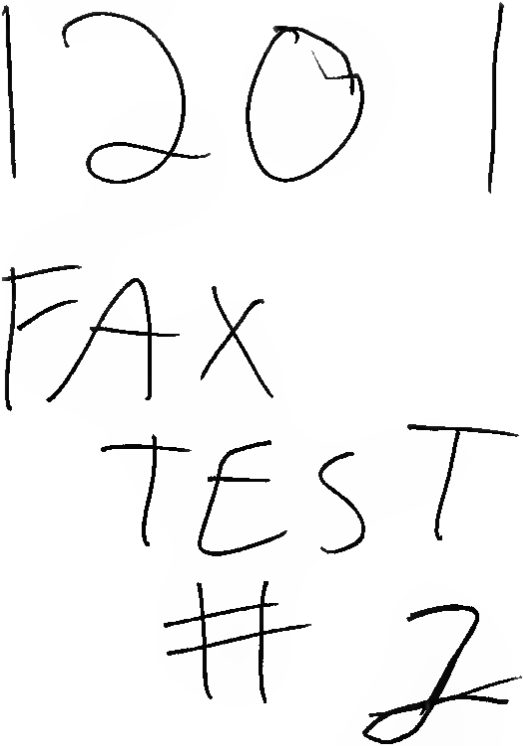
Note

1562-698-4688

GO
ROYALS!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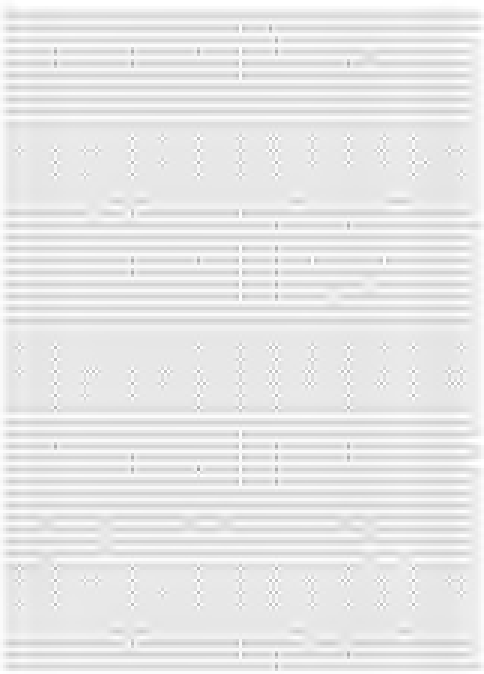

Recipient information

To David Branstetter
Company dim
Fax # 8124758799

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send a fax for free

Sender information

From David Branstetter
Company dim-light Graphics
Email address strawmancomics@gmail.com (from 50.4.123.83)
Phone # 8124758799
Sent on Saturday, February 6 2016 at 4:05 PM EST

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Test

Alpha Bravo Charlie Wombat

Text from Netgain

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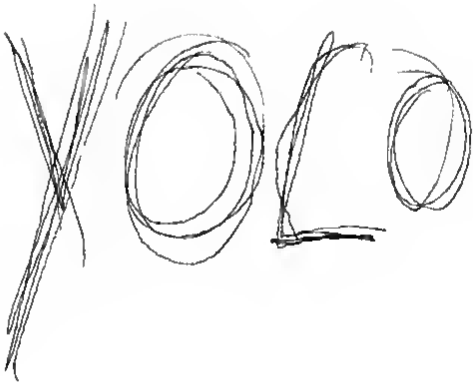
TIME : 12/20/2005 19:11
SER.# : JBK714900

DATE,TIME	12/20 19:10
FAX NO./NAME	8878648
DURATION	00:00:27
PAGE(S)	00
RESULT	SEND AGAIN
MODE	STANDARD

NG POOR LINE CONDITION



201-
604
5455

7921

FAX

TEST

#2

BETTER Times

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Children's Villag

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abused, and neglected childr

Clark Howard Christma Kid

Providing Christmas g
for kids in foster c

Local Businesses
Great Deals

Holiday Savings from
Companies you know

Prison Fellowshi
Angel Tre

Reaches out to
children of prisone

HP Officejet Pro 8600 N911n Series

Fax Log for
Gooding Mortuary
9192424500
Apr 07 2012 10:03PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Apr 7	10:02PM	Fax Sent	18888771686	0:31 N/A	1	OK

FAX

Date 07 15 14

Total number of pages 1

To +12132943943

Company

Department

Fax number +12132942943

From ADM1Chang

Subject RE TESTE GDDC

Sent Tuesday, July 15, 2014 9:51 PM
To [redacted]
Subject TESTE GDDC

or (213) 794-2943

Test Fax from Westley

TRANSMISSION VERIFICATION REPORT

TIME : 07/25/2016 09:51
SER # : MSW402984

DATE,TIME	07/25 09:50
FAX NO. /NAME	15735844933
DURATION	00:00:55
PAGE(S)	05
RESULT	SEND AGAIN
MODE	STANDARD ECM

HS : POOR LINE CONDITION

15 of

Hello World

smoke_and_fly
Registered

Join Date: Aug-02-2008
Posts: 234

2 words: outdoor bush fruit!! taste better than pro and is alot better for u
organic
am a long time grower and hate to see everything getting too complicated
all these nifty people making devices and what not
too much trouble mate!
its just a waste
its needs dirt,sun,water and one shit and bat pro and beam there ya go
if tell u something it doesnt need like OZX-360U Ozone Generator with Built in Air Pump Lit.
hahahahaha
peace

thaliyo-ah
did it/cus

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You may not post replies
You may not post attachments
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Trackbacks are Off
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All times are GMT -5. The time now is 15:14.

Contact Us Medical Marijuana, California Cannabis, Cannabis Clubs, Co-Ops, Dispensary, Directory Archive Top

Page generated in 0.26128 seconds with 8 queries

FAX COVER SHEET

TO	Jane Smith
COMPANY	VEGASBABY
FAXNUMBER	18553901239
FROM	HR Department
DATE	7/13/2017 8:59:37 AM PDT
RE	FAXTEST

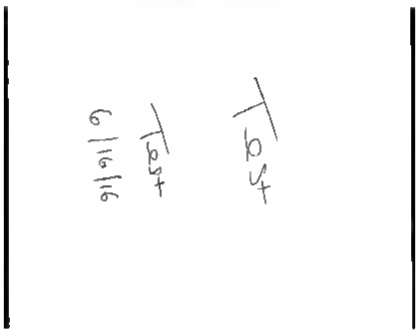
COVER MESSAGE

building healthy · families

Transmission Report

Date/Time	06-16-2016 05:25 17 p.m.	Transmit Header Text	
Local ID 1	7575050676	Local Name 1	Atlantic Marine Construction

This document: Confirmed
(reduced sample and details below)
Document size: 11 52 x 13 60"



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001	570	FAXTRAIN®	05 24 35 p.m. 06-16-2016	00:00:15	1/1	1	EC	HS	CP14400

Abbreviations:
HS: Host send
HR: Host receive
WS: Waiting send
PL: Polled local
PR: Polled remote
MS: Mailbox save
MP: Mailbox print
RP: Report
PF: Fax Forward
CP: Completed
FA: Fail
TU: Terminated by user
TS: Terminated by system
G3: Group 3
EC: Error Correct

TEST PDF

FAX

TO:	FROM:
FAX:	FAX:
PHONE:	PHONE:
SUBJECT:	DATE: [Click to select date]
COMMENTS:	

~~855-330-1234 (mms filter)~~

~~855-330-1235 (no filter)~~

~~213-234-2543(mms filter)~~

213-234-2543 (no filter)

TEST

1-19-11

B

Just use email

HP LaserJet Pro MFP M127fw

Fax Self Test

Mar-22-2016 2:13 PM

The fax detects an active telephone line	Pass
Phone Cord Connected to Correct Port on Fax	Pass
Telephone line current test	Pass
Dial Tone Detection	Pass

Your HP device has passed the fax test.

The fax settings can also affect the performance of your HP device
Please check your current fax settings listed below

Default Resolution	=	Fine
Default Light/Dark	=	<---->
Default Glass Size	=	Letter
Dialing Mode	=	Tone
Redial On Busy	=	On
Redial On No Answer	=	Off
Redial On Comm Error	=	On
Dial Prefix	=	Off
Detect Dial Tone	=	Off
Answer Mode	=	Automatic
Rings To Answer	=	5
Answer Ring Type	=	All Rings
Extension Phone	=	On
Silence Detection	=	Off
Fit To Page	=	On
Stamp Received Faxes	=	Off
Forward Fax	=	Off
Block Faxes	=	On
Private Receive	=	Off
Reprint Faxes	=	On
ECM Error Correction	=	On
Fax Speed	=	FastEV 33
Phone Line Volume	=	Medium
Alarm Volume	=	Medium
Ring Volume	=	Medium
Key Press Volume	=	Medium
Fax Confirmation	=	Never
Fax Error Report	=	On Every Error
Include First Page	=	On
Auto Log Printing	=	On
T.30 Trace Printing	=	Never

Instructions on how to rerun this test.
Step 1 Press the arrow buttons to enter the menu
Step 2 Choose the "Service" menu
Step 3 Choose the "Run Fax Test" item

Test Fax from Westley

Dimension IV (Readiness to change)	Text
Dimension V: (Relapse, Continued Use or Continued Problem Potential)	Text
Dimension VI (Recovery living environment)	Text

Client Signature [redacted]

Date Signed
8/4/2017

Supervisor's Signature [redacted]

Date Signed
8/4/2017

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Solving the TLS 1.0 Problem

By Andrew Marshall
Principal Security Program Manager
Microsoft Corporation

Contributors/Thanks to
Mark Cartwright
Bryan Sullivan
Patrick Jungles
Michael Scovetta
Tony Rice
David LeBlanc
Mortimer Cook
Daniel Semmerfield
Andrei Popov
Michike Short
Justin Burke
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Shipment Receipt

Transaction Date: 03 No / 2014 **Tracking Number:** 1Z7X51310394244961

Addresses Information

Ship To:
St. Margaret's Healthcare
Attn: [illegible]
7918 Jones Branch Drive
[illegible]
[illegible]

Bill From:
[illegible]
Attn: [illegible]
[illegible]
[illegible]
Telephone: [illegible]
Reference:

Return Address:
Return Materials
[illegible]
1320 Albany Ct
[illegible]
[illegible]
Reference:

Package Information

	Weight	Dimensions / Packaging	Declared Value	Reference Numbers
1	7.0 lbs 7.0 lbs (Billable)	Other Packaging	[illegible] USD	

UPS Shipping Service and Shipping Options

Service	UPS Ground Service
Shipping Date and Time	Dec 3rd Day Thursday, Nov 3 2014
Shipping Fees Subtotal	[illegible] USD
Transportation	[illegible]
Fuel Surcharge	[illegible] USD
Declared Value	
Total Charges	[illegible] USD

Additional Shipping Options

Shipment Notification	No Charge
1 [illegible]	
2 [illegible]	
3 [illegible]	
4 [illegible]	

Payment Information

Bill Shipping Charges to: Invoice #44197
Associated Shipper's Account: Shipper's Account #X3 21

Standard List rates were applied to this shipment

Total Charges: [illegible] USD

†Shipment charges are estimated. Insurance
Note: Your invoice may vary from the estimated charges.

For delivery, ship orders Monday/Tuesday to see the UPS Service Guide. To speed the customer service representatives, call 1-800-PICK-UPS for Customer Service 1-800-742-5877 for international service.

Receive Billing Rate Description

UPS's liability for loss or damage to each shipment, package or item of material shipment, limited to $100, unless a greater value is declared in the package value field of the UPS Air Waybill, or a lesser one if shipper agrees that the declared value of such shipment, package or item of material is not greater than $100, which is the maximum liability under UPS's Terms and Conditions of Service. Certain items, such as, but not limited to, perishables, precious metals, negotiable instruments and other items listed in our Service Guide, are excluded from UPS's liability. Limitations of liability for loss or damage may also apply to packages and items shipped internationally. In the case of loss or damage, you must file a claim within a time limit (which may be shorter than nine months) as specified in UPS's Terms and Conditions of Service. Such claim must be accompanied by the shipper's paid UPS invoice number. Depending on the value of your claim, you may be asked to provide additional documentation. The maximum amount of a COD shipment is $50,000. The maximum amount of insurance for certain commodities, such as, but not limited to, jewelry, precious metals, negotiable instruments and items listed in our Service Guide, is $500. These limitations may not apply if you purchase additional insurance. For complete details regarding UPS's liability limitations, terms and conditions for shipping with UPS, including maximum liability limitations and items excluded from coverage, see the UPS Tariff/Terms and Conditions of Service at ups.com. Contact UPS at 1-800-PICK-UPS for a copy of our Tariff/Terms and Conditions of Service.

Hello from Mars level 2

V2WEEDEN

FAX TEST

600 338 877 1655

We live on an island surrounded by a sea of ignorance. As our island of knowledge grows, so does the shore of our ignorance.

— John Arch Wheeler

T38 gateway post
GRN

Challenge Asphalt

116 Nopalitos Way – Santa Barbara, CA 93130
Office (805) 969-2618 Fax (805) 564-4446
Contractor Lic. #568465

Proposal Submitted To

zjsdkjklfsd
lksjdfssd
hsfhskjsdlfj

Proposal

Date	Estimate No.
6/29/2011	2544

Customer Phone	Customer Fax	Job Name and Location	Job Contact	Job Phone	Estimator

Description	Total
test	

We Propose

To hereby to furnish material and labor complete in accordance with above specifications for the sum of: **$0.00**

Payment to be made upon completion.

On any account over 30 days a 5% finance charge per month will be added to the balance. All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. Our are workers are fully covered by Workmens Compensation Insurance.

Authorized Signature

NOTE: This proposal may be withdrawn by us if not accepted within _____days.

Acceptance of Proposal

The above prices, specification, and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature

Date of Acceptance

@her

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Fax number	1-888-877 1655
From	Lawrence Marker
Fax number	(256) 232-8020
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Home phone	(256)232-8020
Date & Time	8/2/2011 3 29 26 PM
Pages	1
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www.hp.com

test

Windows XP
Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP DeskJet 600 on PREMIO

The information below describes your printer driver and port settings

Submitted Time	8:28:48 PM 1/5/2011
Computer name	PREMIO
Printer name	\\PREMIO\HP DeskJet 600
Printer model	HP DeskJet 600
Color support	Yes
Port name(s)	LPT1
Data format	RAW
Share name	HPDeskJe
Location	
Comment	
Driver name	UNIDRV.DLL
Data file	HPDJ600.GPD
Config file	UNIDRVUI.DLL
Help file	UNIDRV.HLP
Driver version	5.00
Environment	Windows NT x86

Test Fax

Additional files used by this driver:
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\HPDJRES.DLL (5.1.2600.0 (XPClient.010817-1148))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\UNIRES.DLL (5.1.2600.0 (XPClient.010817-1148))
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\STDNAMES.GPD

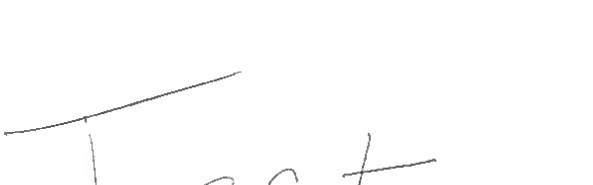
This is the end of the printer test page

DUMMY FAX DOCUMENT

NO CONTENT HERE

Travis

FAXTOY


Test

Windows Printer Test Page

You have correctly installed your Canon MX920 series Printer on XPS.

PRINTER PROPERTIES

Submitted Time:	1:25:33 PM
Date:	1/2/2017
User Name:	ABRAMS\kyle
Computer Name:	XPS
Printer Name:	Canon MX920 series Printer
Printer Model:	Canon MX920 series Printer
Color Support:	Yes
Port Name(s):	CNUMP_04BA38127ESB
Data Format:	RAW
Printer Share Name:	
Print Processor:	Canon MX920 series Print Processor
OS Environment:	Windows x64

PRINT DRIVER PROPERTIES

Driver Name:	Canon MX920 series Printer
Driver Type:	Type 3 - User Mode
Driver Version:	2.65.2.10

ADDITIONAL PRINT DRIVER FILES

C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMUABL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMCIBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMICBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMDCBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMDSBL.DLL
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C:\WINDOWS\system32\spool\DR VERS\x64\3\CNMHOBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMSSILSMB
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C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMSQBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMEIBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMSHBLCHM
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNM NBLCHM
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMUIBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMOPBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMSHBL.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNB_4178.TBL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMP0IL.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMP1IL.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMP2IL.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNMFUBL.DLL

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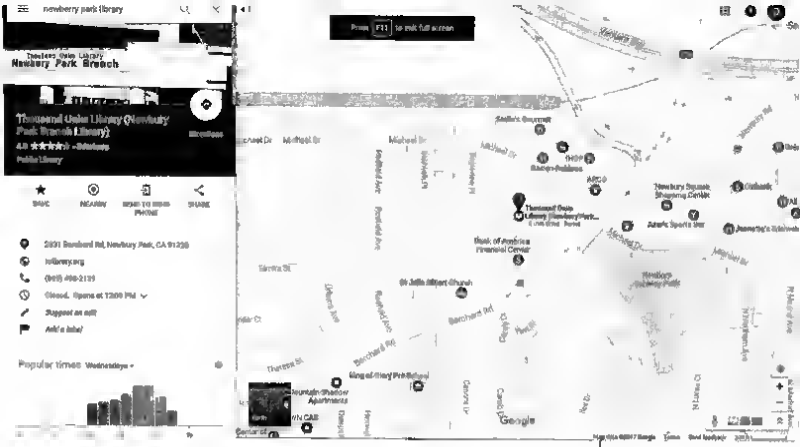
...theory ... to the concept of mantle plumes, the newest area of ... and how they react when continental material is ... boundaries than we saw in chapter one ... of plate tectonics. It

I will be send... ...ing e-mails to the class, to the e-mail address provided for you by MJC, so be sure to activate the account and check it every so often. If you do not receive any this week contact me and I will add your name to the list. Don't forget that the Geology Department (and this class) has a web page which is linked to a great many important resources! Give it a look at http://virtual.yosemite.cc.ca.us/ghayes/serv05.htm.

Sincerely,

Garry Hayes
Geology Instructor



Joy Joy.

My Fax works!

888-877-1655

TEST

FAX

test text file

Windows XP Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP Officejet Pro 8600 on USER A89CE64073.

The information below describes your printer driver and port settings.

```
Submitted Time      4:26:05 PM 4/28/2014
Computer name       USER-A89CE64073
Printer name        HP Officejet Pro 8600 (Network)
Printer model       HP Officejet Pro 8600
Color supported     Yes
Port name(s)        CN434FV26W05KD
Data format         RAW
Share name
Driver name         UNIDRV.DLL
Data file           hpoj_8600.gpd
Config file         UNIDRVUI.DLL
Help file           UNIDRV.HLP
Driver version      6.00
Environment         Windows NT x86
Monitor             HP 5912 Status Monitor

Additional files used by this driver:
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\NPMACRONAMES.gpd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpvplo09.inn
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpvpldrv09.dll    (09.84.00.1173)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpvplui09.dll     (09.84.00.1173)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpfime51.dll
(0.3.07__HH_DOK_PATCH)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpvplres09.dll    (09.84.00.1173)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\copyright.txt
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpinksts5912LM.dll
(28.0.1180.0)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpinksts5912.dll  (28.0.1180.0)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\unires.dll         (6.1.7600.16385
(win7_rtm.090713-1255))
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\locale.gpd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\stdnames.gpd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\1\hpoj_8600_n.inx

This is the end of the printer test page.
```

Prayer to St. Joseph over 1900 years old

O St. Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place in you all my interests and desires. O St. Joseph do assist me by your powerful intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ, Our Lord, so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers. O St. Joseph, I never weary contemplating you and Jesus asleep in your arms. I dare not approach while He reposes near your heart. Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath. St. Joseph, Patron of departing souls, pray for us. Amen

Say for nine consecutive mornings for anything you may desire. It has seldom been known to fail.

This prayer was found in the fiftieth year of Our Lord Jesus Christ. In 1500's it was sent by the Pope to Emperor Charles when he was going into battle.

Whoever reads this prayer or hears it or carries it, will never die a sudden death, nor be drowned, nor will poison take effect on them. They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle.

Make this prayer known everywhere.

Bishop of Trenton

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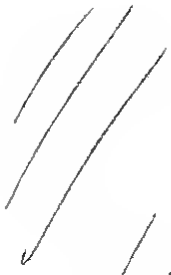
OR

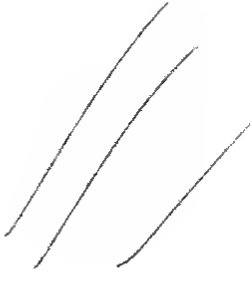
1-503-200-1300

tbsp

- soak beans for several hours
- drain water
- [illegible]
- [illegible]
- make sure water doesn't boil down too much

FAX





O zi ŞMECHERII

CÂT MAI ŞME[illegible]

(FARA TEST)

04/30/2009 12:34 FAX

****
*** ERROR TX REPORT ***
****

INCOMPLETE TRANSMISSION

TX/RX NO	0030
DESTINATION NUMBER	15105450990
DESTINATION ID	
ST. TIME	04/30 12:34
COMMUNICATION TIME	00'32
PAGES SENT	0
RESULT	NG

****
*** TX REPORT ***
****

TRANSMISSION COMPLETED

TX/RX NO.	0020
DESTINATION NUMBER	19048861329
DESTINATION ID	
ST. TIME	04/30 11:34
COMMUNICATION TIME	00'26
PAGES SENT	1
RESULT	OK

Tuesday, March 12, 2024

[redacted]

[redacted]
[redacted]
[redacted]

Dear [redacted],

[redacted]

Thank You,
[redacted]

[redacted]			
[redacted]		[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]

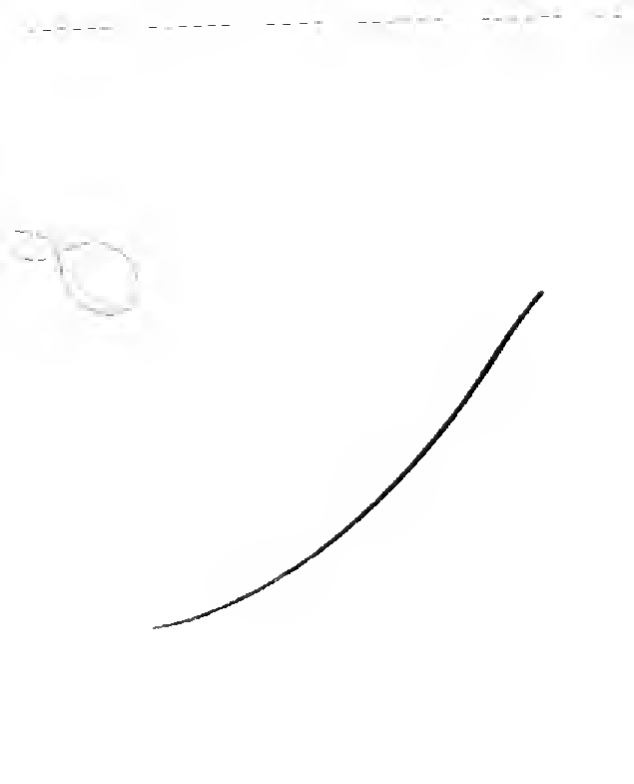
[redacted]			
[redacted]	[redacted]	[redacted]	[redacted]

[redacted]

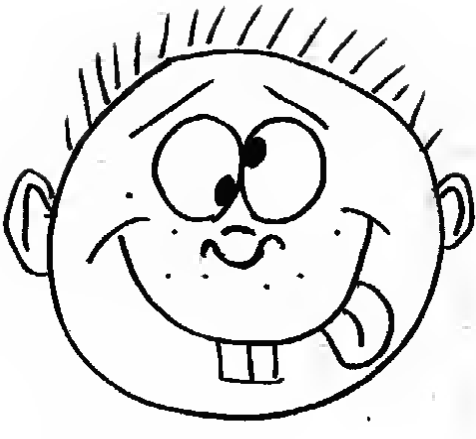
[redacted]	[redacted]		
	[redacted]	[redacted]	

[redacted]

[redacted]

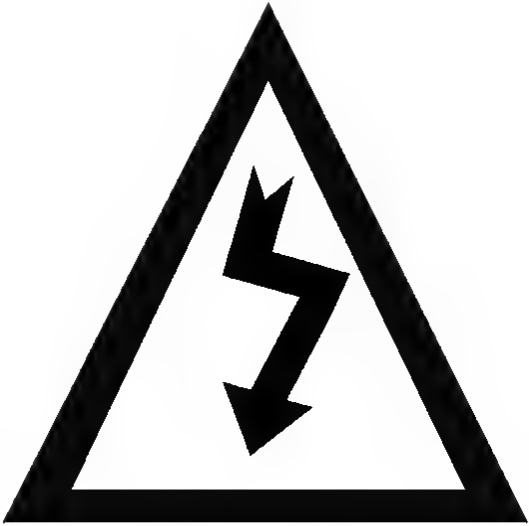


Test



LVHC
I.T. TEST FAX

Kathleen Hill
23 Feb 2015



DANGER 45

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Ph (111) 111-1161 PHN
Exam Date 23 Feb 2018
Accession 2183571ABC Exam # 18-000021
Location Acadia Medical Centre

Ordering Physician: PAUL NUTTER MD

General Information

The Osteoporosis Society of Canada recommends that BMD be performed at least once in all patients aged 65 and over in addition to other potential indications in younger patients

The International Society for Clinical Densitometry recommends that follow up BMD studies be performed on the same machine at the same centre as the previous study for maximum sensitivity and accuracy in assessing change

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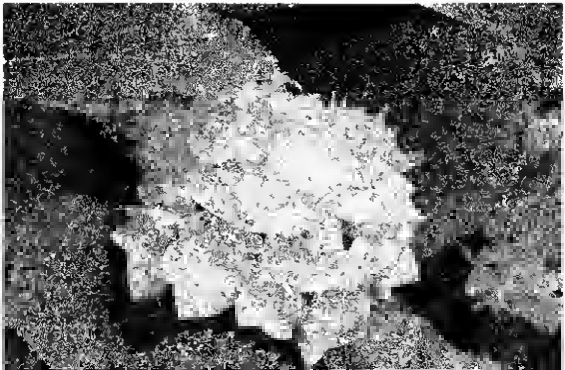

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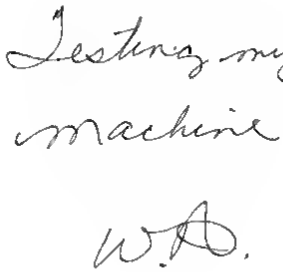
Testing my
machine
W.A.

MOTBOX
UFI

TESTING FAX 1-855-330-1239

DANG

Scanner (HP) work-around for Lion

1. Eliminate all the currently installed HP software by using the uninstaller located in Applications/HP LaserJet Software Uninstaller

2. Unplug the USB cable and the Ethernet cable from the 3055

3. Open the Print and Fax System Preference and <control>-click or right-click on the list of printers on the left. Select system.
Then click OK on the warning

4. Reboot the Mac OS

5. Run the HP All-in-One installer exe file the LJMFP3055a3SnOSX10.9Update-v8.2.dmg provided in THIS directory

http://hp1060.www1.hp.com/bizsupport/TechSupport/SoftwareDescription.jsp?lang=en&cc=us&prodTypeId=3...

(a) Click through any warning messages that appear

(b) It may say that some text file was improperly installed; ignore it

(c) When the installer prompts for the USB cable to be connected do so!

(d) Once the install is complete click restart on the All-in-One installer window. The Mac OS will restart.

6. After the Mac has restarted start the execution of the HP Setup Assistant in one manner
To do so, I opened a terminal window and executed the sudo command as follows.

sudo /Applications/HP LaserJet Software/HP Setup Assistant.app/Contents/MacOS/HP Setup Assistant

(a) DO NOT go past the very first prompt of the HP Setup Assistant!

(b) Now run the usual Apple Software Update Check.
It will find the missing HP printer driver and install it.

(Newer, you can install it directly from here: http://support.apple.com/kb/dl907)

(c) NOW continue with the HP Setup Assistant.
It will show the 3055 printer that it finds in the install window
Click on this printer and then follow the instructions to
complete the execution of the setup assistant.

I had several error messages in the terminal window where I executed
the sudo instruction above. I ignored all of them and waited for the
HP Setup Assistant declared it finished the installation

7. Now the HP 3055 should be functional for Scan and Print.

Try scanning and printing (all this with the USB cable)

Note that as IronBadger wrote in his posts the HP 2 router may have to be restarted a couple of times for the printer to show up for scanning

To avoid this annoying "feature" I put the "HP Scan" app directly on my dock
when I want to scan I just click on that app it always work for me.

By the way, the path of this app is: /Applications/HP LaserJet Software/Scan/HP Scan.app/

B) NETWORK CONNECTION

1. Disconnect the USB and put the Ethernet network cable and restart the printer

2. Locate the printer's web page (I gave it a static IP address in my Airport Express namely 10.0.1.10)
and open this web page in your browser just to make sure that the printer is indeed reachable
on the network.

3. Run the HP setup assistant again using the sudo command above

(c) On the first prompt of the HP setup assistant, click "network"

It detects the printer in the printer's box, continue the installation as above.

For me, it did NOT detect the printer on the network, so I entered the printer's IP address
on my network, namely 10.0.1.10 (I think you must click "create" to enter the printer's IP address).
After this I just followed the HP assistant instructions till it declared that the installation is over

Important: When asked for a printer's name, give the printer

Room 2. Wangye Jhangye Room				Adults: 2	Children: 0
First Name	TEST	Last Name	TEST		
This is Wangye Jhangye Room. Specially designed by Bhatu Boss's second husband Wangye Jadhav. He is creative & innovative designer. Anyone staying in this room will get NTC One as personal gift. Don't miss it come soon + Included: Many Items, but first stay than u'll feel - Not Included: Water					
Room Details	Date	Oct 31			
	Rate:	$ 20.00			
Sub-Total: $20 Tax (11%): $ 2.2 Total: $ 22.2		Note: Rates include Extra Person/Child Fees			

Room 3. Wangye Jhangye Room				Adults: 2	Children: 0
First Name	TEST	Last Name	TEST		
This is Wangye Jhangye Room. Specially designed by Bhatu Boss's second husband Wangye Jadhav. He is creative & innovative designer. Anyone staying in this room will get NTC One as personal gift. Don't miss it come soon + Included: Many Items, but first stay than will u l - Not Included: Water					
Room Details	Date:	Oct 31			
	Rate:	$ 10.00			
Sub-Total: $20 Tax (11%): $ 2.2 = Total: $ 22.2		Note: Rates include Extra Person/Child Fees			

Special Request: TEST

Thanks for selecting INNsight.com as your partner

Testing Outgoing faxing

2075

Hello, I'm a fax....

Welcome to HP Customer Support

HP Fax Products - Testing Your HP Fax Machine with the HP Fax Test Service

Introduction

This document will assist you in testing your HP Fax machine using the HP Fax Test Service.

Print this document for easy reference by clicking the **Printable Version** link in the upper right corner of this page.

Test your fax machine

To test the capability of your fax machine, follow the directions below.

NOTE:

Be sure that your phone number is not Caller ID product by your telephone company prior to attempting to send and receive a fax. Pressing *82 before dialing the toll-free number will override the Caller ID blocking feature in most areas. Other phone company number can prevent you from receiving a fax, including voice mail, call waiting, or call privacy features.

NOTE:

Whenever troubleshooting a fax issue, it is good practice to set the **Automatic Reports** option to **Every time** before attempting a test fax. This way, even if the test fax fails, an error code will be generated that will guide you in future troubleshooting. This option is available in different places on different products, consult the product *User's Guide* for specific steps.

1. Have a one page blank and white test fax to **1-[illegible]** (1-800-473 2949).
2. When your fax is received by the HP Test Fax Service, **we will** generate a return fax to you within this machine confirming that we received your fax. This verifies that you can both send and receive a fax with your fax machine.

If you do not receive a return fax within 5-7 minutes, there may be a problem with the setup of your fax machine. Consult the user manual that came with the product for proper setup and configuration.

NOTE:

The most common cause of failure is that the fax number set in the Fax receive on the machine does not match the number of the phone line connected to the fax. Also, ensure that the fax receive contains the full 10-digit telephone number of the fax machine, including the area code.

For more information or assistance, click **Contact HP** at the top of this page.

Was this machine helpful?

- Yes
- No

Country: [illegible] United States

Windows® Fax and Scan

[illegible]

Fax and scan documents and pictures

Fax: You can send and receive faxes using your computer and an external or internal fax modem and a fax number. You can also print, e-mail, or save a copy of your faxes.

To send a fax:

1. [illegible]

   If you've used Windows Fax and Scan before, the sender and fax number you last used are selected. To use different sender information, select it.

   To start a new fax, click **New Fax**.

2. Follow the instructions in the wizard. You can add a cover page and choose when you want to send your fax.

You can also open Windows Fax and Scan by clicking the Start button, clicking All Programs, and then clicking Windows Fax and Scan. For more information, click the Help button on the toolbar.

Scan: Either use the scanner software that came with your scanner, or use Windows Fax and Scan. You can scan documents or pictures, preview how they look, and then adjust the settings for the scan. You can also save the scanned image as a file or e-mail it directly to someone else.

To scan a picture:

1. Connect your scanner to your computer by following the instructions that came with your scanner, and then make sure that your scanner is turned on.
2. [illegible]
3. [illegible]
4. [illegible]

[illegible] Windows Fax and Scan. For more information, click the Help button on the toolbar.

1-866-977 1655

CLIN CHEM 31/2, 321-325 (1985)

Mixed Acid–Base Disorders

R. N. Walmsley and R. H. White

Mixed acid–base disorders, the occurrence of two or more primary acid–base disturbances in the same patient, are common in the hospital population, but are usually misdiagnosed because of lack of knowledge of the consequences of the primary disturbances. This paper describes seven examples of these disorders recently seen in the authors' hospital, and provides a logical approach to their diagnosis.

Additional Keywords: additive changes, metabolic and respiratory acidosis and alkalosis, blood gases

The simple, or primary, acid–base disorders (respiratory and metabolic acidoses and alkalosis) evoke a compensatory response so that provided the secondary acid–base disturbances and reversion of the blood pH towards (rarely to) normal are, a simple metabolic acidosis will result in a secondary respiratory alkalosis, both of which will ordinarily be reflected in the patients' acid–base-related analytes in blood. When two primary acid–base disturbances occur simultaneously in the same patient, the complex is called a mixed acid–base disorder. If three primary disturbances occur together the patient is described as having "triple acid–base disorder."

Evaluation of Blood Gases

The Henderson–Hasselbalch equation for the bicarbonate buffer system in blood can be simplified to an uncomplicated proportional relationship:

$$pH \propto \frac{[HCO_3^-]}{P_{CO_2}}$$

The numerator ($[HCO_3^-]$) indicates the metabolic aspect of acid–base status: an increase signifies metabolic alkalosis, and a decrease denotes a metabolic acidosis, either of which can be a primary or a secondary compensatory process. The denominator (P_{CO_2}) indicates any respiratory perturbation: an increase denotes a respiratory acidosis, etc.—again, either primary or secondary.

The simplest approach to interpretation of blood gas values is to consider the pH (acidemia or alkalemia), $[HCO_3^-]$ (metabolic acidosis or alkalosis) and the P_{CO_2} (respiratory acidosis or alkalosis) separately then amalgamate the information to arrive at a diagnosis. For example, a patient with a low pH, subnormal $[HCO_3^-]$ (metabolic alkalosis), and a high P_{CO_2} (respiratory acidosis)

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Arlington, Texas 76011

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Fax. 18553301239	**Date** 11/23/2016 12 54.29 PM PST
RE:	**Pages.** 1

Comments.

HP fax

Test.

- Temperature
- Refill for allegra

585- Get - life
Mother de Jam

6875
Test 1

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FAX

7695

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STORE ______________ MONTH ______________

QUANTITY	DESCRIPTION	RETAIL	EXTENSION	CODE

DUMP CODES
"A" = DEAD, "B" = BROKEN "C" = NON SALEABLE

TOTAL DUMP THIS PAGE ______

FRESH ARRANGEMENTS DUMP SHEET

Here is it!

This fax would be send from PC-FAX com

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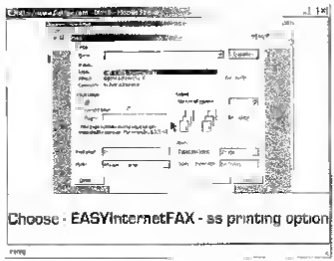
  Incomi ng faxes are sent directly to your e mail account as a PDF file
- Save phone fees, paper, the fax machine and your nerves - and by extension, money!
- High qual ty (optical fibre network)
- Save money and trees!

Start right now!



Choose - EASYInternetFAX - as printing option

Fax

Note

To

Company

Fax Number
18888771655

From
Carmine Sciallo

Company

Fax Number
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Phone
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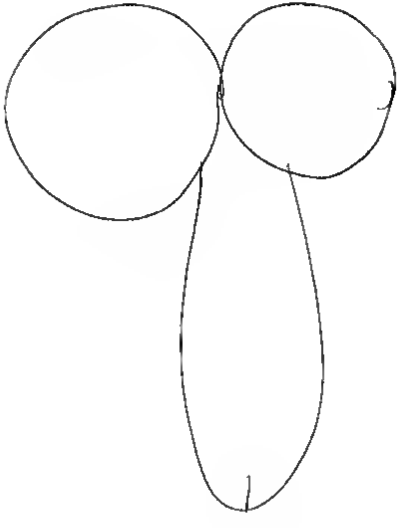
#	Address	Hours of Operation	Latest Express drop-off	Latest Ground drop-off	Services
1	FedEx Kinko's is now FedEx Office Print & Ship location 2430 S Interstate 35 E, Suite 176 Denton TX 76205 Phone: (940) 566-1094 Fax: (940) 566-1236 E-mail: usa9674@fedex.com	Mon 7:00 AM-11:00 PM Tue 7:00 AM-11:00 PM Wed 7:00 AM-11:00 PM Thu 7:00 AM-11:00 PM Fri 7:00 AM-11:00 PM Sat 9:00 AM-9:00 PM Sun 9:00 AM-9:00 PM	Mon 6:00 PM Tue 6:00 PM Wed 6:00 PM Thu 6:00 PM Fri 6:00 PM Sat 3:30 PM Sun No Pickup	Mon 3:00 PM Tue 6:00 PM Wed 3:00 PM Thu 6:00 PM Fri 6:00 PM Sat No Pickup Sun No Pickup	Express/Hold at location/ Ground, Package supplies available, Packing services, FedEx Returns System, Location accepts cash, Saturday service, Saturday Hold at location, Sony/Promo Station, Notary Services, Direct Mail Services



Angela Fultz

From	Fax Server (fax.server@penskeracing.com)
Sent	Wednesday, June 25, 2014 1:24 PM
To	Angela Fultz
Subject	Fax attached (ID: doc16)
Attachments	fax.pdf

Fax sent from "faxer". The phone number is 1-888-877-1655. This email has a fax attached, with ID doc16.
Final Status of fax job: done

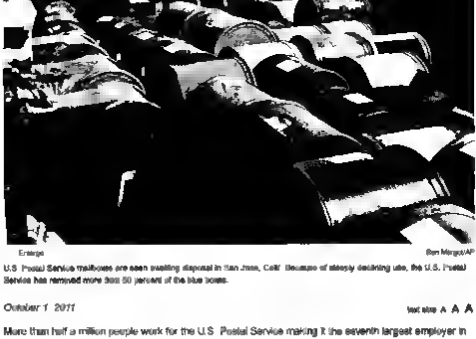
CRIMINAL
CNN
NEWS NETWORK

TEST

-OIT

The Fight To Save The U.S. Postal Service

by NPR STAFF



Enlarge Ben Margot/AP

U.S. Postal Service mailboxes are seen awaiting disposal in San Jose, Calif. Because of steeply declining use, the U.S. Postal Service has removed more than 50 percent of the blue boxes.

October 1, 2011

Text size A A A

More than half a million people work for the U.S. Postal Service making it the seventh largest employer in the world. But like a lot of other businesses, this one is being hit hard by the tough economy and transformed by the Internet.

Just in the last four years, mail volume is down 20 percent, so the agency is struggling to reinvent itself. But change isn't easy. Postmaster General Patrick Donahoe went to Congress to ask for help. His plan, which has been endorsed by President Obama, could mean layoffs, post office closings and the end of Saturday delivery.

J. Scott Applewhite/AP

During a hearing on the troubles of the U.S. Postal Service, Sen. Joseph I. Lieberman (I-CT), left, confers with Sen. Tom Carper (D-DE), who chairs

Republican Rep. Darrell Issa of California blames the leaders of the Postal Service for its problems and wants the service to be under tighter controls. He says the agency's $15 billion in debt – its credit that — is a sign that they have "more than a small cash-flow problem."

Issa's plan would create a "control board" that could, among other things, re-negotiate union contracts. Democratic Sen. Tom Carper of Delaware, who chairs the Senate subcommittee that oversees the Postal Service, agrees that there's a problem with the Postal Service, but the solution he's proposing is very different.

"Part of what we need to do is to enable the Postal Service to take the steps that are appropriate [and] right-size their enterprise for the 21st century, much

Fund Name	Symbol	Fund Category	Aggressive	Moderate	Conservative
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6 462
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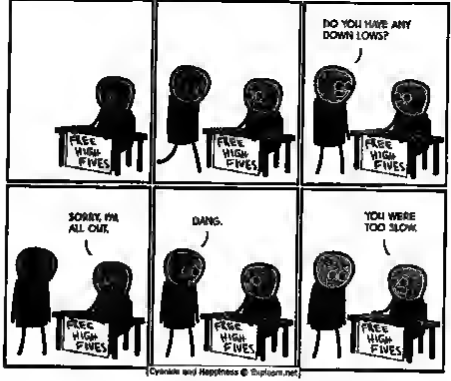
FAX...HELLO

WORLD

To	TEST
Fax number	5105450690
From	
Fax number	7813829644
Business phone	
Home phone	
Date & Time	5/22/2008 3:35:43 PM
Pages	1
Re	TEST

TEST



1-888-677-1655

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FROM

CURTIS

5/29/2011

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TEST PAGE 1

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Fax:
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Phone:
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Comments:

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Windows Printer Test Page

Congratulations!

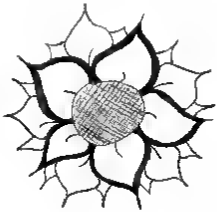
If you can read this information, you have correctly installed your Brother MFC-L2700DW series on POINTBREEZE PC

The information below describes your printer driver and port settings

Submitted Time	11 50 27 AM 1/5/2017
Computer name	POINTBREEZE PC
Printer name	Brother MFC L2700DW series
Printer model	Brother MFC L2700DW series
Color support	No
Port name(s)	BRN3005SCEA4B9F
Data format	RAW
Share name	
Comment	MFC-L2700DW series LAN
Driver name	BRPRM13A.DLL
Data file	BRSML2700DW.BSI
Config file	BRUIM13A.DLL
Help file	BRPRM13A_en-GB.CHM
Driver version	1-08
Environment	Windows x64

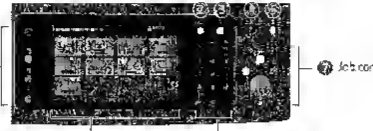
Additional files used by this driver

C	\windows\system32\spool\DRIVERS\x64\3\BRSML2700DW.DAT			
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_en-US.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_en-GB.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_fr_CA.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_fr-FR.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_de_DE.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_it_IT.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_es_ES.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_pt_PT.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_pt_BR.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_nl_NL.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_no-NO.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_sv-SE.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_da_DK.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_fi-FI.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_id_ID.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_ru-RU.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_bg_BG.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_uk_UA.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_cs-CZ.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_hu_HU.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_pl_PL.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_ro-RO.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_sk-SK.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_sl_SI.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_sr_RS.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_hr-HR.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_tr-TR.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_ar-AE.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_vi-VN.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_th-TH.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_zh-CN.DLL	(1 8 0.0)		
C	\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_zh-TW.DLL	(1 8 0.0)		



Xerox® WorkCentre® 7800 Series Control Panel

Available services can vary on your printer setup. For details about services and settings, see the *User Guide*.



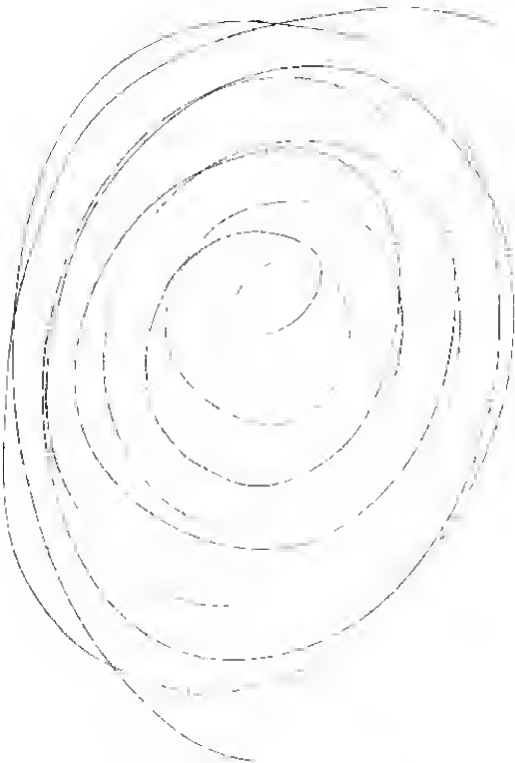
Services Home displays main services, such as copy, scan, and fax.

Services returns to the current service from the Job Status or Machine Status screens, or to the preset service.

Job Status displays active, held, and completed jobs.

Machine Status displays settings and information.

1. Log In/Out accesses password protected features.
2. Help (?) displays additional information about the current selections or service.
3. Language changes the touch screen language and keyboard settings.
4. Power Saver enters or exits energy saver mode.

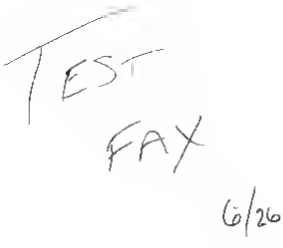


MONTH Apr-12

PSP	CITY	PR GROC	MARS	PR HARD	4lb Core Trial
136	BURNSVILLE	PSP	PSP	PSP	
138	BLOOMINGTON	PSP	PSP	PSP	1
199	MINNEAPOLIS	PSP	PSP	PSP	
203	RICE LAKE	PSP	PSP	PSP	
5	FRANCHISE				1
1	COMMISSARY				[redacted]
6	TOTAL				[redacted]

I LOVE YOU FAX TOY!

HOOK 'EM HORNS!


TEST
FAX
6/26

Test

Juanita

1-888-8771655

TEST

JUST 27 WORDS

**GOD OUR FATHER,
WALK THROUGH MY HOUSE
AND TAKE AWAY ALL MY WORRIES AND ILLNESSES;
AND PLEASE WATCH OVER AND HEAL MY FAMILY
IN JESUS ' NAME.. AMEN**

**This prayer is so powerful.
Pass this prayer to all your friends.**

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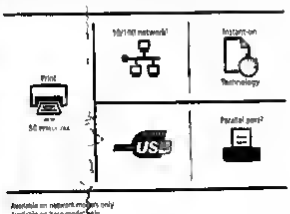
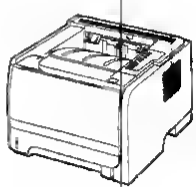
Use original HP LaserJet print cartridges for worry-free, professional quality printing every time
- Designed together with the printer for consistently outstanding results
- Easy to use and replace for low maintenance printing
- Compatible with a range of HP professional-quality everyday papers and specialty papers that fit the way you work



¹ Available on network models only
² Available on base model only



RHODE ISLAND DEPARTMENT OF HEALTH
RHODE ISLAND EMERGENCY MANAGEMENT AGENCY
1980
Rhode Island Special Needs
Emergency Registry
www.health.ri.gov/emregistry

xerox

Supplies Usage

Supplies ordering information is located on

Consumables

1 Toner Cartridges

Black

Life Remaining

Cyan

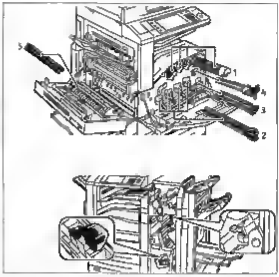
Life Remaining

Magenta

Life Remaining

Yellow

Life Remaining



Staple Pack

OK

OK

Routine Maintenance Items

2 Drum Cartridge

Black (K1)

Life Remaining

Cyan (K2)

Life Remaining

Magenta (K3)

Life Remaining

Yellow (K4)

Life Remaining

3 Waste Container

OK

4 Transfer Belt Cleaner

Life Remaining

5 Second Bias Transfer Roller

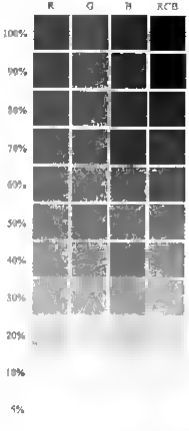
Life Remaining

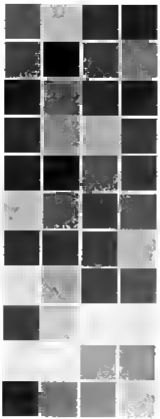
Recycling information is located at:

Printed On: Aug 05, 2015 at 08:00 AM

Printer Activation Date: Jun 16, 2015 16:01:14

Test Page





The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog.
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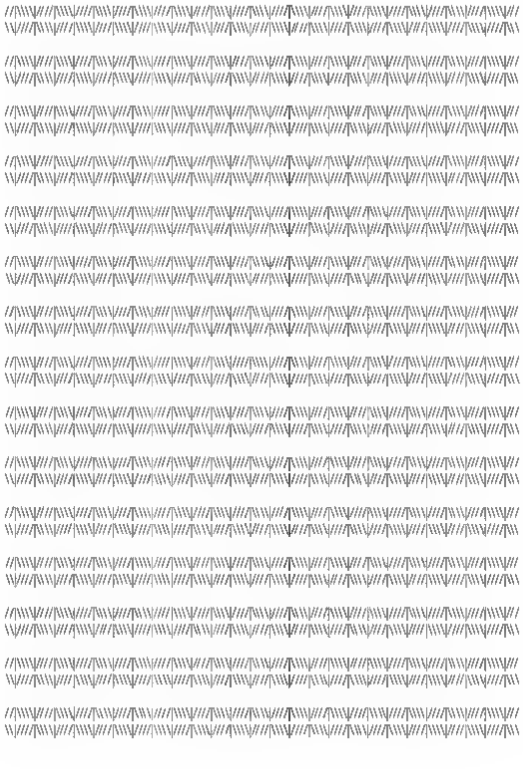
The quick brown fox jump



Skylark
12858 Beaudry Street
Garden Grove, CA 92843
Tel: 714-6 6-7460 Fax: 714-638-4868
Website: www.skylarksalepage.com
Email: sales@skylarksalepage.com

Invoice

Date	Invoice #
6/4/2015	646 [illegible]

Bill To

Pedi Care Center
1495 S. Kihei Rd. # 11
Kihei, HI 96753
Tel 808 874 0151
BJ

Ship To

Pedi Care Center
1495 S. Kihei Rd, # 11
Kihei, HI 96753
Tel 808 874 0151
BJ

P.O. Number	Terms	Rep	Ship	Via	Ship By
			6/3/2015	DHL by S	

Item Code	Quantity	Description	Price Each	Amount
LotionCRLav...	40	Crediion Lotion Lavender 1 gl	9.00	360.00T
paraffinMint		Mentha Paraffin Pedi Mask	92.00	644.00T
SmJbeVitaCG	24	Smith, Vite tap cent kit 4 oz	12.00	288.00T
OrlyPowder8	5	Orly Powder 8 oz	19.00	95.00T
BuffBlk5N2	2	Crediion Shiny Buffer 18 x 2	35.00	70.00T
Wrap gStrip	2	Nonwoven Wax Strip, 2.5" x 100 Yard	10.00	20.00T
WrapStrip...	2	Nonwoven Wax Strip, 2.5" x 40 Yard	7.00	14.00T
OPITopCoat0.5	12	OPI Soak Off Gel Base 0.5 oz.	13.00	156.00T
TripleXXX2	12	OPI Soak Off Gel Top .5 oz	13.00	156.00T
PouchSterile...	1	Tripple XXX Pedicure Mint 20,000 Tablets	170.00	170.00T
	3	Sterilization Pouch 200 pcs box (20 boxes/case)	120.00	360.00T
CuticleOil*Ve...	6	Cuticle Oil (2 Yellow, 2 Clear)	12.00	48.00T
C8PowderBl...	2	Crediion Powder 23.28-oz, Natural Mix	45.00	90.00T
Manicure Bru...	1	Manicure Brush 72 pcs	18.00	18.00T
Cuticut 12	2	Cuticut 12 lbs.	33.00	66.00T
NailTekTreat	10	Nail Tek II Therapy 0 .oz	6.00	60.00T
Dr G's AntiFu...	17	Dr. G's Anti Fungus	6.00	102.00T
C8Lampdgl	2	Crediion Liquid 1gl	39.00	78.00T
DropStop0.5	24	KDS Lab Cleaner .5 oz Blue	5.00	120.00T
FootSpaWhit	10	Foot Spa, White, 110V, ETL Approval	2.00	48.00T
C8LEDdigBalF...		Clean & Easy Digital Paraffin Spa with Steel Bowl	25.00	250.00T
Carbide#3/3	3	Carbide Bit-Large Barrel, 3/32, Silver	110.00	330.00T
			10.00	30.00T

Skylark will assume no liability for any changes in chemical characteristics. All returned items unless unopened must be in origin al condition and within 30 days

Subtotal	
Sales Tax (0.0%)	
Payments/Credits	
Balance Due	

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Phone # _____ *Best time to call* _____

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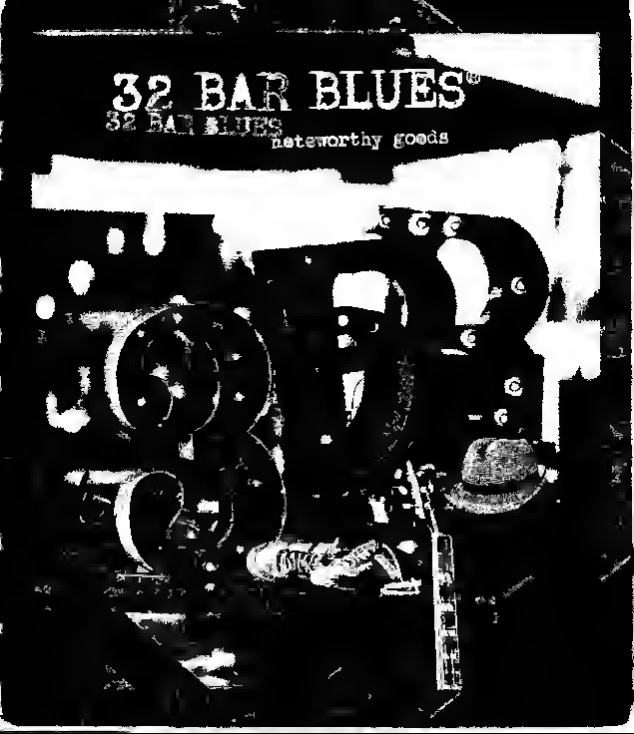
Test


32 BAR BLUES®
32 BAR BLUES
noteworthy goods

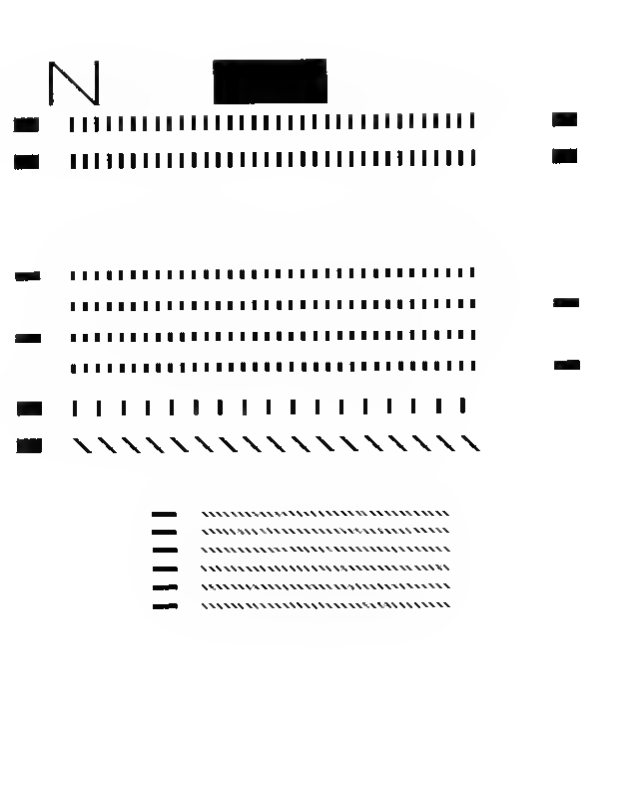
Hail Mary

Today begins the 90th Anniversary of the apparition of the Virgin of Fatima

When you receive this email say a Hail Mary and ask for a special favor

"Hail Mary, full of grace. The Lord is with thee Blessed art thou among women and blessed is the fruit of thy womb Jesus Holy Mary, Mother of God, pray for us sinners now and at the hour of our death, Amen " (your request)

Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth When you are down to nothing, God is up to something This has been traveling since 5/13/07!



The Ultimate Showdown

FAX TEST

1-888-877-1655
1-503-200-1300

100	64306	Current ink supply in socket 2 <Region>	1
101	64307	Current ink supply in socket 2 <Fill Level>	71
102	64308	Current ink supply in socket 2 <Family>	20
103	64309	Current ink supply in socket 2 <model #>	0
104	64310	Current ink supply in socket 2 <serial number>	2834112
105	64311	Current ink supply in socket 2 <ink supply status bits>	65792
106	64312	Current ink supply in socket 3 <Region>	1
107	64313	Current ink supply in socket 3 <Fill Level>	74
108	64314	Current ink supply in socket 3 <Family>	20
109	64315	Current ink supply in socket 3 <model #>	0
110	64316	Current ink supply in socket 3 <serial number>	524572
111	64317	Current ink supply in socket 3 <ink supply status bits>	65792
112	64318	Current ink supply in socket 4 <Region>	1
113	64319	Current ink supply in socket 4 <Fill Level>	51
114	64320	Current ink supply in socket 4 <Family>	20
115	64321	Current ink supply in socket 4 <model #>	0
116	64322	Current ink supply in socket 4 <serial number>	27312
117	64323	Current ink supply in socket 4 <ink supply status bits>	65792
118	64324	Current ink supply in socket 5 <Region>	1
119	64325	Current ink supply in socket 5 <Fill Level>	69
120	64326	Current ink supply in socket 5 <Family>	20
121	64327	Current ink supply in socket 5 <model #>	0
122	64328	Current ink supply in socket 5 <serial number>	564489
123	64329	Current ink supply in socket 5 <ink supply status bits>	65792
124	64330	Current ink supply in socket 6 <Region>	1
125	64331	Current ink supply in socket 6 <Fill Level>	48
126	64332	Current ink supply in socket 6 <Family>	20
127	64333	Current ink supply in socket 6 <model #>	0
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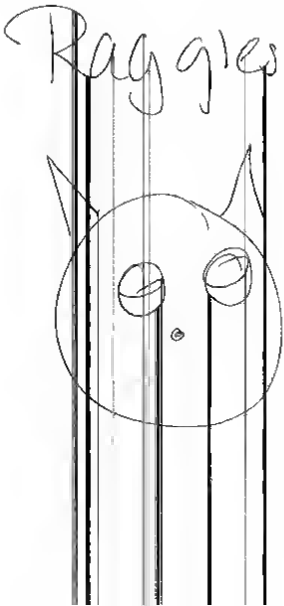
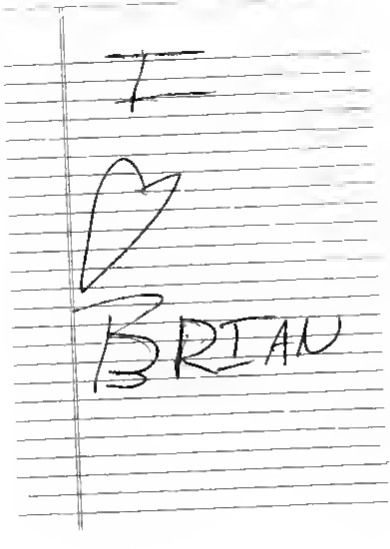
129	64335	Current ink supply in socket 6 <ink supply status bits>	65792


Raggles


I
BRIAN

Test
Fax

PERSONAL CARE TASKS

CLIENT NAME	TIMES FRAMES: MINUTES (1st)											TIMES FRAMES: HOURS				FREQUENCY: DAILY				FREQUENCY: WEEKLY						
YEAR	5	10	15	20	25	30	35	40	45	50	55	60	1	2	3	4	1	2	3	4	S	M	T	W	R	F	S
1 Help with eating/feeding																											
2. Help with using the toilet																											
3 Help with bathing																											
4 Help with teeth, hair, nails, etc.																											
5 Help with dressing																											
6. Help with moving in or out of bed/wheelchair																											
7 Help with walking, standing, or moving about																											
8. Help with medicine																											
9 Help with cooking/serving meals																											
10. Help with shopping/errands																											
11 Help with laundry																											
12. Help with housework																											

TOTAL HOURS NEEDED TO PROVIDE MINIMAL CARE: _____

1 Eating/Feeding helping with use of utensils, cup/glass, getting food/drink to mouth, cutting up/manipulating food on plate, cleaning face and hands as needed after a meal.
2. Toileting helping on/off toilet, commode/bedpan emptying commode/bed pan managing clothing, wiping and washing, body after toileting, cleaning ostomy and/or catheter tubes/receptacles, applying diapers and disposable pads. may include doing catheter or ostomy or bowel programs.
3 Bathing helping with cleaning the body or parts of the body shampooing hair, using tub or shower sponge bathing, including getting a basin of water, sponging, floating, soaping, rinsing, and drying.
4 Grooming helping to maintain personal hygiene and neat appearance, including hair combing, brushing, oral hygiene, shaving, fingernail and toe nail care, perform a physician ordered not to do so).
5. Dressing helping with putting on/taking off, buttoning/unbuttoning garments/undergarments, special devices such as buckling braces, corsets artificial limbs or splints.
6 Transferring helping to move from one position to another such as from bed to or from wheelchair or sofa, to come to a standing position and/or assist/convey to prevent skin breakdown.
7 Mobility—helping with walking or moving around inside the living area changing locations in a room, moving from room to room or climbing stairs.
8. Taking Medication helping with administering prescribed or over-the-counter medication
9. Meal Preparation/Cleanup helping with planning menus, washing, peeling, slicing, opening packages, uses & lugs, mixing ingredients, lifting pots/pans, reheating food washing, operating stove/microwave, setting the table, serving the meal washing/drying dishes and putting them away
10. Shopping/Errands helping to complete a list identifying needed items, picking up items at the store, managing cash/checks, transferring items to home and storing them away, phoning in and picking up prescriptions.
11 Laundry helping by getting laundry to machines sorting, handling many containers, placing laundry into machines, operating machine controls, handling wet laundry drying, folding, and storing laundry
12. Housework helping with sweeping, vacuuming, washing floors, washing kitchen counters and sinks, washing the bathroom, changing bed linen, taking out garbage/trash, dusting and picking up, cleaning oven and stove, cleaning and defrosting refrigerator bringing in fuel for heating/cooking purposes if necessary

COMPLETED BY _____ DATE _____

Reddy Medical Center
Nagaraina Reddy MD
32965 Brown St.
White Castle LA United States 70788
Business 225-545-3631
DEA # AR1612911 LIC # 157758

Date	01/22/2013	Prescription#	120384
Name	Test, Female	DOB	09/01/1983
Address	123 main Street		
	GENERAL ELECTRIC NY United States 12345		
Rx	Lortab 5-500 mg Tablet		
	Take 1 Tablet Orally bid (twice a day) PRN(as needed)		
Dispense	"30" (Thirty) Tablet		
Indications	Abscess Dental		

Refill "0" times RFL_____ Label_____

N Reddy
Nagaraina Reddy MD
This document signed electronically by Nagaraina Reddy MD on 01/22/2013

FAX

To: **TESTING FAX**
Company
Fax: 16563301239
Phone

From:
Fax
Phone
E-mail: ben.grady@interpublic.com

NOTES:

test fax

Date and time of transmission: Friday, October 30, 2015 10:06:28 AM
Number of pages including this cover sheet: 01

INVOICE NUMBER

INVOICE DATE 05/22/2012

MISSION BACKGROUND AND PARAMETERS

LAST NAME | "BIG" NAME

ADDRESS (NO PO BOX)

CITY | STATE | ZIP CODE | CONTACT PHONE | APARTMENT #

CUSTOMER ESL # | CUSTOMER ID #

SYSTEM NOTES

See Fris for additional notes
Added backup hard drive

I have received and am satisfied with the goods delivered and/or services completed as noted on this invoice.

CUSTOMER SIGNATURE

DATE 05/22/12

AGENT RECOMMENDATIONS

QUANTITY	SKU	DESCRIPTION	PRICE	AMOUNT	TAX
1		add on autodesk backup	49.99	49.99	0.00
1		Westa dig tal			

This portion to be completed by Customer: Date / / I hereby authorize Best Buy® to charge the credit card indicated below in the amount of $ for products and services provided by Best Buy.

Customer Signature

1. customer payment information is entered below, follow these steps:
Also, the payment has been processed at the store, ensure the sales associate containing the customer's payment information from this sheet by writing on the dashed line.
—Place the bottom/unscored section of the form into the stand it has at the customer service area.

REWARD ZONE® PROGRAM #

VISA MasterCard AMERICAN EXPRESS DISCOVER

EXPIRATION DATE

SUBTOTAL	
SALES TAX	
TOTAL DUE	
AMOUNT PAID	
BALANCE DUE	
PAYS SAID	
CHECK NUMBER	

BURN OR EAT THIS COMMUNIQUE AFTER READING

Contact the customer to obtain for credit cards CID.
Don't record the CID in any location other than POS
system back found

2961-0100053

Colors: 1655, 2 Size: 8.5"x11"x Stock: Unbranded 3-part NCR White, Canary and Pink

ATM
TESTI21

Final Review Terms
Comparative Studies 100
Winter 2012

Here are seventeen of your final review terms. Thanks to all of your classmates who participated in the review. Needless to say, these all represent one of many different ways that a concept can be defined and there are many different examples that you can draw from. When you are studying, do use these terms as an aid. However, be sure to review your readings and notes so that you are able to formulate these concepts and give examples in your own words. Good luck!

1. Geocentric model vs. Heliocentric model:

The **geocentric theory** placed Earth at the center of the universe with all the planets orbiting around it. The **heliocentric theory** states that the Earth and planets revolve around a stationary Sun at the center of the universe.

The geocentric theory was ascribed to the Egyptian astronomer Ptolemy and supported by Aristotelian physics during the late 16th century. This theory was also supported by the Catholic Church because they believed humanity as the center of God's creation therefore at the center of all existence.

A polish astronomer named Nicolaus Copernicus proposed that the sun, not the earth, was at the center of the universe in the early 17th century. Both Johannes Kepler and Galileo Galilei supported the heliocentric theory. Johannes Kepler analyzed tables and discovered the elliptical orbit of planets and their positions. Galileo Galilei furthered the conformation of the heliocentric theory with the use of a telescope to view the heavens.

2. Absolute monarchy:

An absolute monarchy is a form of government where a monarch, like a king or queen, is the main authority in the country. The authority of the monarch is supreme and overrides all other government officials. They control every aspect of the government, including the military, policymaking, diplomacy, etc. Many governments also have things like a Parliament or a Congress along with the monarch. But, they are usually just in place to assist the monarch, or to make it seem like the government is fairer than it actually is. The 16th and 17th centuries are considered the height of the power of absolute monarchs.

Authority in absolute monarchies is obtained mainly in two ways. One is hereditary, which means that the position was inherited due to a family member being the monarch, and there having hand-picked the relative as the successor. The second way is through marriage. If someone marries the absolute monarch and the monarch dies, then the authority is passed to their husband or wife, unless it is specifically stated otherwise. Many absolute monarchs believed that they were chosen specifically by God to lead their countries, which was called the "divine right." There were many citizens who also viewed some of the monarchs as sort of Gods themselves, and actually worshipped them as if they were deities as well.

3. Characteristics of Baroque Art:

Baroque art of the 17th century is characterized by drama, intense light, rich deep color and dark shadows. Baroque artists draw the most important part of an action that has happened in time. It tended to depict the height of action and emotion rather than say the contemplation that preceded it or its after-effects. The two most important patrons of the arts during this period were the aristocracy and the Catholic church.

1/20

SUPPLIES

garbage bags
bulletin / white board
message books
~~registration tape~~
ink
Paper
~~Packing~~ tape

BIRD / SMALL ANIMAL

Wild Bird Seed
Sweet Har guinea pig
KAY hamster food
Chicken supplies
Millet
Bird gravel / health grit
Roudybush
Wildbird
Chin dust

DOG

portable water bottles
Chain leashes
wellness 95%
fish oil capsules
twirly chews
metal bowls
puppy nylas
martingale
pill shooters
~~Value Brand~~
chomper toy
tiny rawhides
FYDO beds
FROMM
soft poo bag holders
belly bands
Halo veg. cookies
doggie Nation
~~Yogurt dog treats~~
~~tennis balls~~
TVFF toys
Prayer Flags
bullies
K9 Calming
~~Fart busters~~
NPO
CPO
Buddy bis
Large antlers

Wellness cans 99¢ turkey/chick/lamb
Diggin Chunks beef tradusa
Value Brand
Ozmix cows
12" bullys
Ultras - M
Evangers 6oz Beef k9
Halo
Hti chk/ap
6" bullys
Shipwrecks treat bags
Large antlers
Bully Wash

CAT

covered boxes
petromalt
PNV Smelly Cat
Litter Deodorizer
peacock feathers
Newmans cat cans
Solid Gold 3z tuna
Ocean Fish
Petroleum FREE Hairball relief
tapeworm dewormer
collars
petmate litter liners - large
Arm & Hammer litter deodorizer
metal litter scoops
~~Snapshots~~
NPO
CPO
Halo
avangers

Halo
lizers
FISH FLAKES
bowls
Bee Pads
treat bags

~~Room - 15th Lunch Area~~

Room - 15 Act

~~Room - 14th Panama~~

~~Lunch - Green Block~~

Lunch - Fido Room 14th

PATIENT NAME _____ DATE _____

Please answer all of the questions below to the best of your ability. If you have questions, please feel free to ask for help.

CHIEF COMPLAINT. (please list the body part that hurts TODAY the most)

_____

_____

MARK ON THIS PICTURE WHERE YOU HAVE PAIN OR COMPLAINT:

FOR THE INJURY
Mark an "X" on the picture where you were injured.

FOR PAIN
Mark a number from 1 to 10
(1 being slight pain and 10 being severe pain)
on the picture in the area of the pain.

HAVE YOU HAD ANY OTHER INJURY SINCE THE LAST TIME YOU SAW THIS DOCTOR? ☐ YES ☐ NO
If YES what is the injury? _____

HAVE YOU SEEN ANY OTHER DOCTORS SINCE YOUR LAST VISIT HERE? ☐ YES ☐ NO
If YES, what is the doctor's name? _____

LIST ALL THE MEDICATIONS YOU ARE TAKING NOW

MED: _____ DOCTOR Rx: _____
MED: _____ DOCTOR Rx: _____
MED: _____ DOCTOR Rx: _____
MED: _____ DOCTOR Rx: _____
MED: _____ DOCTOR Rx: _____

1-888-897-1055

I

CHICAGO

This is a test fax

Test FAX

TEST

TEST

TEST

TEST

TEST

TEST

TEST

TEST FAX

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**********
** TX REPORT ***
**********
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JOB NO.	8148
DATE, TIME	09/12 07:44
FAX NO./NAME	?
DURATION	
PAGE(S)	
RESULT	
ECM	
BX KNOWLEDGE TRANSMITTING OK	818553302233
ERROR	*****

similarities between." But "compares to" means to observe or only some likenesses between while "compare with" means differences are being examined.

- Compared with 1996, the 2000 election was problematic.
- The finance of ads are compared this fund to another fund. ("compared with" could also be used depending on the intended meaning.")

compass points/direction —

- Capitalize **compass** directions when they refer to identifiable places but not when they are just general directions. I.e.,
  Southern/Northern/Eastern/Western/Central Europe
- **Chicago Manual of Style** (15th ed. item 8.48 and 8.50)
  8.48 Compass points and terms derived from them are lowercased if they simply tell the direction of location.
  8.50 (lowercase) southern Africa (referring to the southern part of the continent) but (cap) Southern California (considered a cultural entity as much as a geographical term)

compensation (portfolio manager and/or analyst) — When talking about any Capital Group portfolio manager and/or analyst compensation in our materials please follow these guidelines:

- For content intended for a **retail** audience, use it a following additional clause (as of June 2008): "Compensation paid to our investment professionals is heavily influenced by investment results over rolling four- and eight-year periods, to encourage a long-term investment approach."
- For content intended for a **business to business** audience: For B-to-B content, you may evaluate and decide not to be consistent with the SAI. In order to encourage a long-term focus, the rewards based on investment results are calculated by comparing pretax total investment returns to relevant benchmarks over the most recent one-, four-year and eight-year rolling averages, with the greater weight placed on the four-year and eight-year rolling averages.

composite vs. mandate — See "mandate vs. composite" entry.

comprise/compose — "Comprise" is a near synonym for "include," except that it means to include everything. It "includes" wouldn't make sense — those stocks obviously don't include the DOW — "comprises" is not correct. That's also why "is comprised of" is always incorrect, because it would be saying "is includes of." "Comprise" means to contain, to consist of something. "Compose" means to create or to make up the whole. The parts compose the whole; the whole comprises the parts. The whole is composed of the parts; the parts are comprised in the whole.

Incorrect

- The Copy Editors Forum is comprised of 27 copy editors. (It should read: The Copy Editors Forum "comprises/is composed of" 27 copy editors.)

Correct

- The MFP book comprises several sections on the American Funds.
- The MFP book is composed of several sections on the American Funds.
- The style guide comprises sections on punctuation, acronyms and house style.

Cannes/estar — One word. Lowercase "s." A secretary we have retained in an

DECLÉOR
PARIS

MARCH 2011

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Receive 40 free Decleor shopping bags with purchase of $250 or more of these special value sizes

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3 OFFERS

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TEST

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Test

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Hello

goodbye

Tonk tonk tonk.
"No trees were harmed in the sending of this message. However, a significant number of electrons were terribly inconvenienced.

HP Officejet 4620 e-All-in-One

Fax Test Report for
Jenne I Ross
13525630249
Jan-00-00 00:00AM

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test

The fax settings can also affect the performance of your HP device
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	Off
Rings to Answer	2
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	Off
Fax Speed	Medium (14400)
Fax Forwarding	Off
Busy Redial	No Redial

Refer to your User Guide for more information on the fax test and settings

Instructions on how to rerun this test:
Step 1. Press the "Setup" button
Step 2. Choose the "Tools" menu
Step 3. Choose the "Run Fax Test" item

CN2A82300205RT

CWM1FN1211ER

Test Page

FAX

Date	01/22/2015
Pages including cover sheet	1

To:	2132942943@rcfax.com
Phone	
Fax Number	*+12132942943*

From:	Charles Zink
	C C P M
	2415 Larkspur Lane Suite B
	Redding
	CA 96002
Phone	*+1 (530) 246-2370*
Fax Number	*(530) 338-3232*

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RingCentral

[illegible]

Monday, June 05, 2017

[illegible]	[illegible]
[illegible]	[illegible]
[illegible]	[illegible]
[illegible]	[illegible]

Dear Lorem Ipsum,

[illegible]

Regards,
[illegible]

[illegible]

[illegible]	Lorem Ipsum	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]

[illegible]	Visa	[illegible]	06/2017
[illegible]	[illegible]	[illegible]	[illegible]
		[illegible]	[illegible]

[illegible]	1	[illegible]	1
[illegible]	June 20, 2017	[illegible]	June 20, 2017

[illegible]

[illegible]	Lorem	[illegible]	Ipsum
[illegible]	[illegible]		
[illegible]	[illegible]		

[illegible]

[illegible]

[illegible]

TRANSACTION REPORT

APR/09/2018/MON 06 28 PM

FAX(TX)

#	DATE	START T.	RECEIVER	USE TIME	PAGE	TYPE/NOTE	FILE
001	APR/09	06 27PM	18659801336	01'08"26	1	NORMAL OK	ECM 7667

TRANSACTION REPORT

APR/09/2018/MON 11 23 AM

FAX(TX)

#	DATE	START T.	RECEIVER	USE TIME	PAGE TYPE/NOTE	FILE
001	APR/09	11 23AM	18339801319		RENGED BUSY	7668

THE FOLLOWING DATA COULD NOT BE SENT:
PLEASE GIVE THIS TRANSACTION REPORT TO SENDER

Pablo

1 855 370 1239

[redacted]

```
-----BEGIN PGP PUBLIC KEY BLOCK-----
Version: GnuPG v2 0 17 (GNU/Linux)

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=V2ou
-----END PGP PUBLIC KEY BLOCK-----
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Testing

888 877-1655

[redacted]

Room 2: Double Queen Standard — Adults: 2 Children: 1

First Name	evb	Last Name	cvbcv

The Double Queen bathroom offers all the amenities of the Queen bathroom, but have much more space, making it ideal for families. Four persons can be accommodated in the Double Queen configuration in air-cool blend comfort. Each room has a refrigerator, flat-screen TV with cable, iron/ironing board, coffee maker and microwave/fridge, and a spacious bathroom with a full bath and hair dryer.
+ Included: Free WiFi, WiFi in room Coffee & Continental Breakfast
Not Included: The Inn is a Non-Smoking room

Room Details	Date:	Feb 4	Feb 5
	Rate:	$ 30.00	$ 30.00

Sub-Total: $60.00
Tax (11%): $ 6.6 Total: $ 66.60

Note: Rates Include Extra Person/Child Fees

Room 3: King Standard — Adults: 1 Children: 1

First Name	cvbcv	Last Name	cvbcv

Our Standard King is a spacious air-conditioned room with a California King-size bed making it a perfect room for couples. The Standard King room boasts a beautiful granite surround bathroom with a full bath and hair dryer. Each room has a built in personal safe, iron & ironing board, coffee maker and microwave/fridge.
+ Included: Free WiFi, HBO, In-room Coffee & Continental Breakfast
Not Included: The Inn is a Non-Smoking room

Room Details	Date:	Feb 4	Feb 5
	Rate:	$ 20.00	$ 20.00

Sub-Total: $40.00
Tax (11%): $ 4.4 Total: $ 44.40

Note: Rates Include Extra Person/Child Fees

Special Request: cvbcv

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Name
Tel

Date	Time	Type	ID	Duration	Pages	Result
Jan 02	09:01PM	Send	8884732963	02:16	0	Error e51

A communication error has occurred during the fax transmission.
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Let's fart! Fax!
Smell good!

Test

Comp A	Comp B
send/ recieve remote scan ✓ (image) (pdf) (note: open with M or P M)	✓
print ✓	✓
send remote fax	✓
recieve remote fax ✓	X
upper scan tray ✓	lower scan tray
send/ recieve fax ✓	printer scan configured ✓

Fax For Asterisk™

[redacted]

Administrator Manual

401-00012

Rev. D7

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7/19/17

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- ✓ **Computer & Office Equipment Recycling**

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- ✓ *Cell Phone Destruction*
- ✓ ***Large Appliance Recycling & Freon Removal***
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Fax or email me the completed pick up form by 1/16/14 and I will contact you to schedule your pick up!

Wendy Gordon Rodriguez
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wendy@responsiblerecyclingservices.com
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Skin: No rash, bruising, or other lesions on visible parts. Bilateral upper extremities: Bilateral scars consistent with prior surgeries.

Psychologic: Normal mood and affect. Cooperative and motivated.

Musculoskeletal

Head and Neck: Normal weight. Facies symmetric. Normal range of motion. Neck nodes: No palpation and range of motion. Good neck control and strength. Tandy's level normal.

Spine/Ribs: Spine is midline and straight. Physiologic degree of kyphosis and lordosis. Pelvis is level with normal laxity. No palpable deformities or bony pain. Strength is normal. No pain to palpation. Ribs are symmetric, without deformity.

ULs: Normal alignment. No masses present. ROM normal in shoulders, elbows and wrists. Normal dexterity skills. Strength and control is appropriate for age.

LEs: Limb lengths are equal. Gait is normal. Coronal plane alignment is normal. Joints are stable and smooth with normal ROM and normal pain behavior.

Hips: Hips are supple with a full range of flexion and extension, abduction, and rotation. No tenderness with range of motion. Right hip is symmetric. Strength in the hips is normal.

Knees: No effusion. Patellar tracking normal. Ligaments with good tolerance to stress. Stable at varus and valgus stress. ROM full. No tenderness along the joint line. No contractures.

Feet: Normal color, temperature, and capillary refill bilaterally. No edema. Normal pedal pulses bilaterally. Normal joint ranges of motion. No tenderness to palpation.

Neuro: Neurovascular exam is normal, including perfusion, venous return, sensibility and motor function.

Radiographs:

Impression:

Plan:

Erik de Henderson, MD

In summary, 6/5/03 FX METACARPAL SHAFT CLOS

[redacted]

Test
Fax!

DUMMY FAX DOCUMENT

NO CONTENT HERE

HP LaserJet Pro MFP M521dn

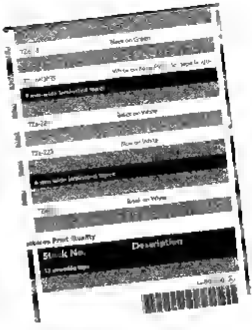
Fax Confirmation

[illegible]

Job	Date	Time	Type	Identification	Duration	Pages	Result
50	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	1	[illegible]

ATU

Test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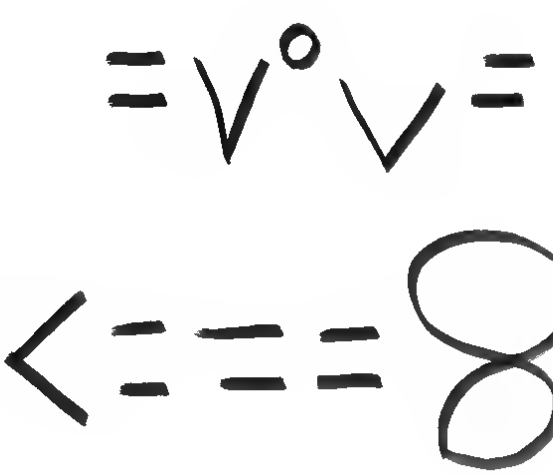
Blue on White
Red on White
Stock No.
Description

test



8584

FAX

TEST

2

Houston Open Rd 3	Sell Price	Buy Price
15:30 Chad Campbell/Geoff Ogilvy	1	4
15:30 Chad Campbell/Andres Gonzales	1	4
15:30 Geoff Ogilvy/Andres Gonzales	1.5	15
15:30 Luke Donald/Kyle Reifers	0	3
15:30 Luke Donald/J.J. Henry	1	4
15:30 Kyle Reifers/J.J. Henry	0	3
15:40 Robert Streb/Mackenzie Hughes	0	3
15:40 Robert Streb/Troy Merritt	1	4
15:40 Mackenzie Hughes/Troy Merritt	0	3
15:40 Harris English/J.J. Spaun	0	3
15:40 Harris English/Spencer Levin	4	7
15:40 J.J. Spaun/Spencer Levin	3	6
15:50 Peter Uihlein/Matt Jones	1	4
15:50 Peter Uihlein/Tyrone Van Aswegen	3	6
15:50 Matt Jones/Tyrone Van Aswegen	1	4
15:50 Jimmy Walker/Charles Howell III	1.5	15
15:50 Jimmy Walker/Bernd Wiesberger	0	3
15:50 Charles Hewell III/Bernd Wiesberger	0	3
16:00 Jamie Levemark/Ryan Blaum	1	4
16:00 Harold Varner/Vaughn Taylor	1.5	15
16:10 Kevin Chappell/Ricky Barnes	1	4
16:10 Kevin Chappell/Graysen Murray	3	6
16:10 Ricky Barnes/Grayson Murray	1	4

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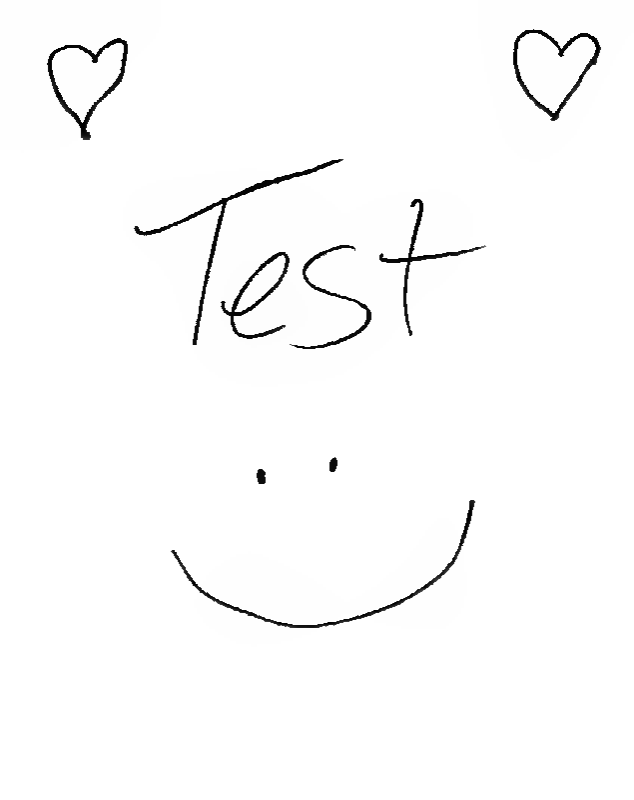
Test

Serial Number Input

Printer	[illegible]
Scanner	[illegible]
MDF	
FAX	
Antenna	
Display	
Modem	
Card	[illegible]
Jump	
Fax 1	
ICS 0	
HDD	
ROM	[illegible]

Table 00

Normal

Vdc C	—
Vdc M	—
Vdc Y	—
Vdc K	782
Vg L	—
Vg M	—
Vg Y	—
Vg K	409

Thick 1/21

Vdc C	—
Vdc M	—
Vdc Y	—
Vdc K	782
Vg C	—
Vg M	—
Vg Y	—
Vg K	364

Thick 2/3/4

Vdc C	—
Vdc M	—
Vdc Y	—
Vdc K	782
Vg L	—
Vg M	—
Vg Y	—
Vg K	365

Black

Vdc C	—
Vdc M	—
Vdc Y	—
Vdc K	982
Vg C	—
Vg M	—
Vg Y	—
Vg K	409

Temp. & Humidity

Temp./Humidity	0026
Humidity	59%
Absolute	11
Paper Temp.	22.6

Post card transfer temp. shift

	Post

Install Date

	2014/12/11

Memory/HDD State

Memory	2032 M

HDD

Total Size	[illegible]
Vacant Area	[illegible]

Coating Amount

	Warm

Machine State

Running State	Type2
Paper Remained	Type2

Market Entry Area

	US

Correction Data Acquisition

	OFF

	CCD Check		I/O Check	
	CLAMP	GAIN	CLAMP	GAIN
BK	019	198	000	fail
RF	064	198		NG
GR	062	184		NG
GF	060	184		NG
BU	022	140		NG
BL	066	148		NG

Maintenance Parameters

MP Adjustment Data	OFF
Self Test	ON
Internet Fax	OFF

Printer Unit

Drive	ON
Relay2	OFF
Relay3	OFF
Relay4	ON
HDT	OFF
Bypass	OFF
Cover Switch	OFF

Staple	OFF
Scanner	OFF
ADU	OFF

Adobe Connection

Setting of Browser	[illegible]

Bluetooth Setting	Invalid
ADF Setting	DF-201

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January 23 2002

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```
# $FreeBSD: src/share/skel/dot.cshrc,v 1.14 2010/12/21 17:09:25 kensmith Exp
#
#
# .cshrc - csh resource script, read at beginning of execution by each shell
#
# see also csh(1), environ(7)
#

alias h         history 25
alias j         jobs -l
alias la        ls -a
alias lf        ls -FA
alias ll        ls -lA

# A righteous umask
umask 22

set path = (/sbin /bin /usr/sbin /usr/bin /usr/games /usr/local/sbin /usr/local/bin $
HOME/bin)

setenv  EDITOR  vi
setenv  PAGER   more
setenv  BLOCKSIZE       K

if (${?prompt}) then
        # An interactive shell -- set some stuff up
        set filec
        set history = 100
        set savehist = 100
        set mail = (/var/mail/$USER)
        if ( $?tcsh ) then
                bindkey "^W" backward-delete-word
                bindkey -k up history-search-backward
                bindkey -k down history-search-forward
        endif
endif
```

Windows XP Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP Officejet Pro 8500 A909g Series on TEST.

The information below describes your printer driver and port settings.

Submitted Time	11/00/06 PM 07/13/2012
Computer name	TEST
Printer name	HP Officejet Pro 8500 A909g Series
Printer model	HP Officejet Pro 8500 A909g Series
Color support	Yes
Port name(s)	HP_192.168.1.3_MY9AF61DD1
Data format	RAW
Share name	Printer6
Location	IP=192.168.1.3,Host=HPFC5E10
Comment	
Driver name	UNIDRV.DLL
Data file	hpwl85g3.gpd
Config file	UNIDRVUI.DLL
Help file	UNIDRV.HLP
Driver version	6.00
Environment	Windows NT x86
Monitor	PCL hpf3108z

Additional files used by this driver:

C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpwl85g3.vdf
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpwl85g3.xml
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfsc082.dtd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfhl082.cab
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfsm082.gpd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfsm082.gpd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\STDNAMES.GPD
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpwl85ga.ini
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfst082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfut082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hprvu082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpwl85g3.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfev082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpf3r082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfns082.dll (A.04.07.002)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfie082.dll (A.06.00.001)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\UNIRES.DLL (6.0 6801.22116 (vistaspl_idr.080219-2730))
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\HPCDMC32.dll (1, 0, 2, 37)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfrr082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfpa082.vdf
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpfpa082.dll (70.082.15.00)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpwl85g0.cfg

This is the end of the printer test page

Test 12345

FAX

Company

TO

Name Fax Toy

Fax Number 855-330-1239

Date

# of Pages 1
(including cover sheet)

FROM

Name

Contact Number

Subject Test ☐ Urgent ☐ Please Reply

Message

This is a test of fax website

Templates by Vertex42.com

Test

DsVal

Merry Christmas

Printout Test Page

Using the Epic Print Service (RTF)

Printer Path: D:\RIGHTFAX\PRODUCTION\INBOX

Cell 1,1 (red)	Cell 1,2	Cell 1,3
Cell 2,1		Cell 2,3
Cell 3,1	Cell 3,2	Cell 3,3 (blue)

Linear barcode

Aztec barcode

Datamatrix barcode

Image rendering test

SUNDAY - MAY 24, 2009
3rd ANNUAL
SAILING THRU THE SHORES
5K RUN/WALK

(Runners @ 12:00 noon / Walkers @ 12:05)

Memorial Day Parade
Jefferson Avenue

Registration
Prior to May 11, 2008 $10.00
After May 11, 2008 $10.00
(Race T-shirts not guaranteed for registrations received after May 11, 2008)

PARTICIPANTS CAN PICK UP PACKETS AND CHECK IN ON RACE DAY
11:00 am - 11:45 am at
Masonic Temple on 11 Mile Rd
(1 block west of Jefferson)

Questions Contact
sesfunrun@hotmail.com

WATCH WEBSITE FOR UPDATES

Click here for the registration form!

Scholarship Application
available at all 5
west High schools

Please patronize these businesses, without their support this race would not be possible.

~ 2009 SPONSORS ~

John P. Jacobs, P.C.	Harper Chiropractic Center
Pure Water Station	PIP Printing & Marketing Sv
Optimist Club of St. Clair Shores	Swarry Construction
Eastside Bagel	Lac Ste. Claire Kiwanis

Race Results 2008

Please keep in mind that there may be error with the times. Individuals with no time posted did not finish or did not turn in their ticket stub. We apologize for any discrepancies.

If you have any feedback, comments, or concer please feel free to e-mail us at our new e-mail ac sesfunrun@hotmail.com

02091

SBA

Corporate Headquarters, 233 Crossways Park Dr

Woodbury NY 11797 800-343-5548

FOR INFORMATION CALL

EWR

07/17/2013

QA717-3

SERVICE STATION TRACKING NUMBER

QA717-3

ORIGIN DEST

EWR JFK

SHIPPER 123

ShipperTest

10 Main Rd,

Edison, NJ, 08817

9170119383

RECEIVER 999

120 Second St,

Brooklyn NY 112 8,

7150930191

BILL TO:

BILLING TO [redacted] SHIPPER

ShipperTest

DELIVERY INSTRUCTIONS, MSD by 07/31/2013

Test Special Instructions

PIECES	DESCRIPTION	WEIGHT	DIMENSIONS LENGTH	WIDTH	HEIGHT

Must Deliver No Later Than 07/31/2013

RECEIVED FREIGHT IN GOOD ORDER

RECEIVER'S SIGNATURE _____

PRINT RECEIVER'S NAME _____

TELEPHONE NUMBER _____

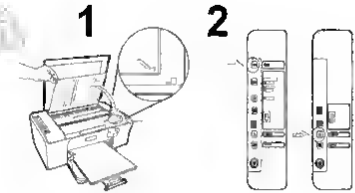
QA717-3

TRACKING NUMBER

DATE [redacted]

TIME [redacted]

TOTAL CHARGES



Scan the sheet by pressing Scan or Resume to align cartridges.

Numérisation (Scan) numérisez feuille, Appuyez (Resume) alignez cartouches.

Abgabe Seite von Scanner (Scan) Blatt scannen, mit "Fortsetzen" (Resume) Patr ausrichte.

Escanee hoja presione Escáner (Scan) o Prantalla (Resume) para alinear cartuch.

Esse sheet not Scanner (Scan) of Hewetten (Resume) cio cartridges: ed to ajuns.

Digit. folha pens. Digitalizar (Scan) ou Continuar (Resume) o/ alinhar cart.

카트리지를 정렬 [스캔] 또는 [재시 시작]을 눌러 인쇄 시설
보조 용지를 스캔합니다.

skanowanie Tutaj skanu (Scan) wiki nalegio rolnyna (Powrót) ulmJkodpalin

10 DEER RUN
WAYLAND MA 01778
508-358-[illegible]
508-358-[illegible] FAX
[illegible]

I authorize Dr Joseph Tankunofy name
address
telephone
508-363-0574 fax
e-mail

to release the following records:
all records

concerning Eugene Akerman name
16 Strawberry Hill Rd, #24 address
Acton, MA 01720
05/06/1960 date of birth

Please send these records to:

Steven E. Locke, M.D
10 Deer Run
Wayland, MA 01778

For the purpose of: Providing medical consultation or medical care

Signature: Date 12/17/2014

Relationship Self

Witness Date:

Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your EPSON PC-FAX driver on DELL 4VHGZ12

The information below describes your printer driver and port settings

```
Submitted Time:  12/09/27 PM 11/19/2016
Computer name:   DELL 4VHGZ12
Printer name:    EPSON WF 4640 Series (FAX)
Printer model:   EPSON PC FAX driver
Color support:   No
Port name(s):    EP00CC72 WF 4640 SERIES
Data format:     NT EMF 1.003
Share name:
Location:
Comment:
Driver name:     EFXGI09A.DLL
Data file:       EFXDI09A
Config file:     EFXUI09A.DLL
Help file:       EFXHI09A.chm
Driver version:  4.01
Environment:     Windows x64
Default datatype: NT EMF 1.003

Additional files used by this driver:
  C:\Windows\system32\spool\DRIVERS\x64\3\EFXMI09A.DLL    (2.0.0.26 built by
009R01)
  C:\Windows\system32\spool\DRIVERS\x64\3\EFXI1RMV.exe    (2.0.0.26)
  C:\Windows\system32\spool\DRIVERS\x64\3\EFXI1RMV.dll    (2.0.0.26)
  C:\Windows\system32\spool\DRIVERS\x64\3\FUDAVUTL.dll    (2.0.0.26)
  C:\Windows\system32\spool\DRIVERS\x64\3\FUFANSYS.dll    (2, 1, 3, 18)

This is the end of the printer test page
```

TEST FAX

855-580-1251

Mark's

-last

FAX

Test fax from Circuit ID

Canon

ENGLISH
ESPAÑOL

Office All-in-One
Equipo multifunción de oficina

PIXMA MX340 series

Getting Started
Read Me First

Guía de inicio
Léame en primer lugar

Make sure to read this manual before using the machine. Please keep it in hand for future reference.

Asegúrese de leer este manual antes de usar el equipo. Consérvelo a mano para utilizarlo como referencia en el futuro.

QT5-V5V82

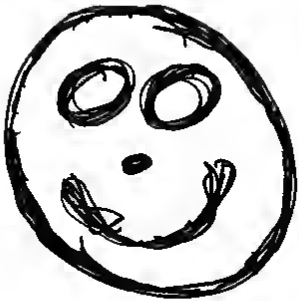
BACKOFFICE

TEST

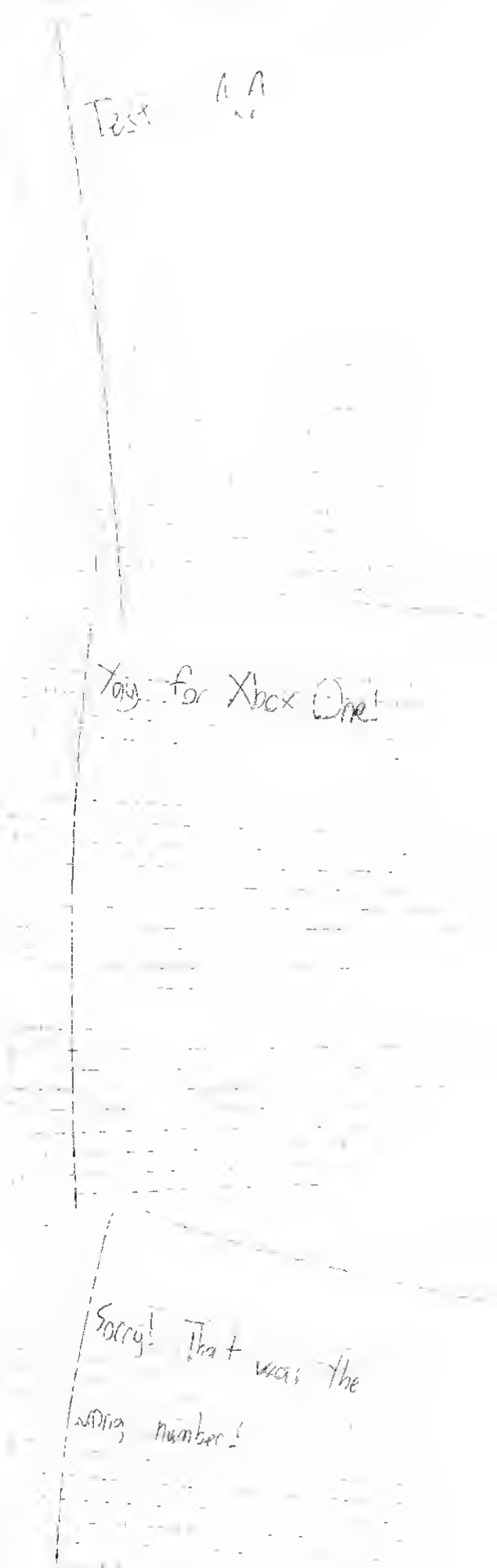
FAX

1-855-330-1239

1-213-294-2943



It works!


Test
Yay! for Xbox One!
Sorry! That was the
wrong number!

FROM **TO**

Name: [illegible]

Phone: [illegible] Fax: [illegible]

Email: [illegible]

Sent: [illegible] [illegible] pages, [illegible]

Subject: [illegible]

Comments:

BBVA Compass

Send Fax

Time 10:00 p.m.
Date 08/26/2013

Test of sending fax

Some/info	33600 0002
Some Number	0000
Big Number	*****0000
Some Type	Transaction
Amount	$600.00

YADA YADA YADA YADA YAD (http://www.[illegible].com)
DUM DIDI DUM DIDI DO 1-[illegible] GOTTA GO WOO HOO

JUST FOR THE SAKE OF IT

I AM PUTTING THIS HERE

mailstation 2™

digital mailing system

The *mailstation* 2™ system is equipped with smarter technology to eliminate guesswork.

This new mailing system allows you to manage your mail online. You can refill postage, update postal rates and more right from your PC. It also integrates easily with the USPS Shipping Assistant® which calculates those complicated shape-based postage rates for you—ensuring your mail gets delivered.

Connects to your PC for online postage refills and postal updates quickly and conveniently.

Built-in scale calculates and sets correct postage automatically so you never overpay.

In just 15 minutes you can print postage for over 150 postcards, letters or packages.

USPS Shipping Assistant® integration ends guesswork by determining complex shape based rates.

Try it for 60 days FREE. Get $50 in FREE postage.

Call or visit

Item Number: 1999925111

TEST

FAX

TAX 211 on 4870-3621

SCHOOL FOR THE SUPER EDUMEMCATED

"THIS CERTIFIES THAT"

CAMERA

has successfully completed the required course of study approved by the Board of Education for the State of Idaho, and is hereby awarded this

DIPLOMA

Status report of fax connection

Sep-03 2014 12:44 PM

Name : Phil Fiskur

Tel : 7083906193

Check Items

1.	Product Hardware Check	PASS
2.	Phone Cable Connection Check	PASS
3	Connection Port Check	PASS
4	Phone line Connection Quality Check	PASS
5.	Dial Tone Detection	PASS

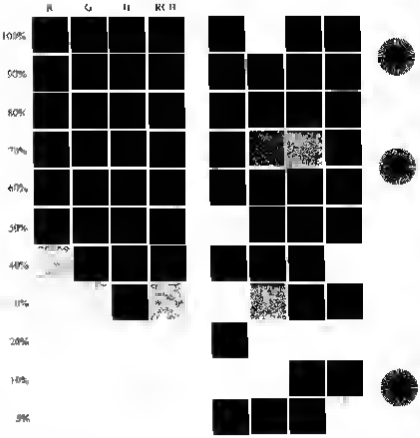
Status

The fax connection is OK

Please complete ONLY the highlighted areas.

- [illegible] your name [illegible] as it is printed on your Social Security card.
- [illegible] and [illegible] city, state and ZIP code.
- One of the [illegible] signature. [illegible] witness [illegible] years of age or older. The [illegible] NOT [illegible] required.
- [illegible] return [illegible] using the [illegible] self-addressed, stamped envelope, or for faster processing you may fax to (618) 236-5795 or email to [illegible]

Test Page



The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the laz
The quick brown fox jumps over th
The quick brown fox jumps ove
The quick brown fox jump

Test fax Craig

Vonage Test Fax

Fill in the values below and click "Print Test Fax Page"

To:	From:
Fax:	Fax:
Phone:	Phone:
Subject: Test Fax	Date

Fax Settings

Reference your Owner's Manual for help adjusting the settings below

ECM (error correction mode)	Off
Baud Rate	9600
International	On (this is set on a per-call basis)
Resolution	Standard
Answer Mode	Fax Only
Rings to Answer	Zero (0)
Call Waiting	Off
Bandwidth Saver	High (90 kbps)
Distinctive Ring	Off

Troubleshooting Steps

The steps below will help you resolve common faxing problems.

- Switch off fax machine and unplug power adapter from device and from wall outlet.
  - Let fax machine remain off for 60 seconds
- Try a different phone cord between the fax machine and the Vonage device.
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device, bypassing any home wiring.
- If using an All-In-One device, temporarily disconnect device from PC.

Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help

Call us at 1-VONAGE-HELP (1-866-343-4357) or visit **www.vonage.com**

Comments
Monthly/Weekly Progress Report testing print layout. Monthly/Weekly Progress Report testing print layout

Dimension I (Intoxication / Withdrawal Potential)	Monthly/Weekly Progress Report testing print layout. Monthly/Weekly Progress Report testing print layout.
Dimension II (Biomedical Conditions and Complications)	Dimension II (Biomedical Conditions and Complications)
Dimension III (Emotional, Behavioral or Cognitive Conditions and Complications)	Dimension V (Relapse, Continued Use or Continued Problem Potential
Dimension IV (Readiness to change)	Dimension III (Emotional, Behavioral or Cognitive Conditions and Complications)
Dimension V (Relapse, Continued Use or Continued Problem Potential)	Dimension IV (Readiness to change)
Dimension VI (Recovery/living environment)	Dimension V (Relapse, Continued Use or Continued Problem Potential Dimension VI (Recovery/living environment)

Counselor's printed name:
[redacted]
Counselor

Date Signed
1/12/2017

Supervisor's Signature
[redacted]
Supervisor

Date Signed
1/12/2017

Confidentiality statement

Information permitted on this facsimile and the documents accompanying it are protected by Federal confidentiality rules (42 CFR part 2). The Federal rules prohibit you from making any further disclosures of this information unless it is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR part 2.

P/O # A5K7K-1

ORDERED :08/21/09

Buyer : ADIR INTERNATIONAL/LA CURACAO
1605 W. OLYMPIC BLVD
LOS ANGELES CA 90015
PH:(213)388-4412 FAX (213)365-4614

Supp #M78 - K MARIN GIFTS INC
132 N ALLEN AVE APT 2
PASADENA CA 91106
PH:(800)933 3972 FAX:(888)559-1803
FAX REP:(714)983-8378

SHIP TO: 18111 HARBOR BLVD FOUNTAIN VALLEY CA 92708

ITEM ID	DESCRIPTION	ORD	COST	TOTAL
79S-M78-SXVALORPREMI	UMBRO SOCCER SHOE SXVALOR LU	46	36 00	1,656 00
79S-M78-SPECIALIPREM	UMBRO SOCCER SHO SPECIALI PR	18	35 50	639 00
79S-M78-SALAS5	UMBRO SALAS 5 SOCCER SHOE	18	28 00	504 00
79S-M78-VALORJR	UMBRO JUNIOR VALOR SOCCER SH	16	21 00	336 00
79S-M78-SPECIALIWB	UMBRO SOCCER SHOE SPECIALIWB	16	33 60	537 60
79S-M78-SALASF	UMBRO SOCCER SHOE SALA SF	15	33 00	495 00
79S-M78-SXFUTSAL	UMBRO SOCCER SHOE SXFUTSAL	15	32 75	491 25
79S-M78-SALASPEED	UMBRO SOCCER SHOE SALASPEED	10	30 00	480 00
79S-M78-CAMPEONATO	UMBRO SOCCER SHOE CAMPEONATO	15	25 20	378 00
79A-M78-GLVS2	SOCCER GLOVES PROFESSIONAL P	10	23 00	230 00
79E-M78-BALL2K	SOCCER BALL PREMIUM	10	15 00	150 00
8S-M78-XAIVII	UMBRO SOCCER SHOE COMPETIT	51	31 35	1,598 85
38P-M78 823	HUGOOL - SOCCER DVD	30	4 90	147 00
38P-M78 913	GOLES DE MEXICO EN LOS MUNDI	30	4 90	147 00
79A-M78-110	CRISTIANO RONALDO	30	4 90	147 00
79A-M78-547	LEONEL MESSI	30	4 90	147 00
38P-M78-395	RONALDO EL FENOMENO	30	4 90	147 00
38P-M78-849	GIGANTES DE BRASIL	30	4 90	147 00
38P M78 004	CAMPEONISIMO CHIVAS	30	4 90	147 00
38P M78 871	AMERICA 90 AÑOS	30	4 90	147 00
				8,583 70

Terms :

Discount :

Freight :

Buyer :

How to ship :

When needed 08/21/09
Delivery on 08/21/09
Cancellation 09/15/09

Date 08/21/09

Salesman :

X

All freight companies please fax packing slip with P.O number and call to schedule a delivery
Phone (714)775-9700
Fax (714)775-9058

Please verify pricing prior to product shipment

SANTA ANA

82609

Please Print

First and Last Name	Title (Dentist, RDH, RDA, Office Manager, etc)	E-Mail Address

Testing.htm

chili

1 pound lean ground beef
1 cup onion, chopped
1 cup green pepper, chopped
1 can (16 ounces) Bush's BEST Chili Beans
1 can (16 ounces) Bush's BEST Dark Red Kidney Beans
1 can (14.5 ounces) diced tomatoes
1 can (6 ounces) tomato paste
½ cup water
½ teaspoon black pepper
1 teaspoon salt
1 tablespoon chili powder
2 teaspoons oregano
2 cloves garlic, minced
Chopped green onion (garnish)
Sour cream (garnish)

In large pan, cook beef, onion, and green pepper until meat is browned. Drain excess grease. Stir in remaining ingredients, except green onion and sour cream. Bring to boil; cover, reduce heat, and simmer for 20 minutes. Garnish with green onion and dollop of sour cream.

AIRMAN LEADERSHIP DISTANCE LEARNING COURSE

PROFESSIONAL AIRMAN

Thomas N. Barnes
Enlisted Educa
Maxwell-Gunter AFB

Air University

"Be gentle and you can be bold; be frugal and you can be liberal, avoid putting yourself before others and you can become a leader among men"

-Lao Tzu

Monday, May 18, 2015

Reservation Confirmation
FSF75108-2775-283
Created: 05/18/2015 4:15:56 PM GMT
Booking Source: Standalone

For: Bhatu Swaminiti Hotel & Suites
Fax: 1(855)-880-3239
Attn: Ajesh Patel
Subject: Booking Confirmation

Dear Ajesh Patel,

We have received the following booking request for your property. Please review the information below and confirm availability, rates and any special requirements by replying to this email or contacting us at help@wisight.com.

Thank you,
Insight.com

Guest Info			
Please fill in the following information and return it to us via email, fax or mail. Thank you for your business.			
Contact:	sdfasdf sdfasdfsd	Title:	sdfasdfasd
Address:	Sdfasdfs	Phone:	4433331
City:	sdfasdf	Country:	United
Email address:	prateek.gupta.india@insight.com	Telephone Number:	sdfasdfsd

Billing Information			
Card Type:	Visa	Expiry Date:	05/2015
Credit Number:	4111111111111111	CV Number:	123
		Guest Total:	$58.70

Room Details			
Number of Rooms:	2	Number of Nights:	1
Check In:	May 18, 2015	Check Out:	May 19, 2015

Room 1 - King Bed			Adults: 1 Children: 0
First Name:	sdfasdf	Last Name:	sdfasdfsd
Room Rate:	Date:	May 18	
	Rate:	$44.99	

Sub-Total: $44.99
Tax (17.00%): $4.22 + Fees ($5.00) = Total: $52.22

Extra Taxes Apply: 11% Room Tax/Fee
Discount: 10.00% on All Room Charges

Room 2 - Queen Bed			Adults: 1 Children: 0
First Name:	sdfasdf	Last Name:	sdfasdfsd
Room Rate:	Date:	May 18	
	Rate:	$21.99	

Sub-Total: $21.99
Tax (17.00%): $3.67 + Fees ($5.00) = Total: $27.67

Extra Taxes Apply: 11% Room Tax/Fee

Special Requests: test

Thank you for booking with us. We look forward to hosting you.

Windows XP
Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Canon MX880 series FAX on ACER.

The information below describes your printer driver and port settings.

Submitted Time	12_08 36 PM 6/28/2013
Computer name	ACER
Printer name	Canon MX880 series FAX
Printer model	Canon MX880 series FAX
Color support	No
Port name(s)	CNBJNPFAX_BS87177C5606
Data format	RAW
Share name	
Location	
Comment	
Driver name	CNCADAN DLL
Data file	CNCAJAN IMI
Config file	CNCAUAN DLL
Driver version	4 01
Environment	Windows NT x86
Monitor	Canon BJ FAX Language Monitor MX880 series

Additional files used by this driver:

C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNCARAN_DLL (10 00 2 20)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNCAOAN DLL (10 00 2 20)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNCAIAN.DLL (10 00 2 20)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNCAZAN_DLL (10 00 2 20)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNCARANO_411 (10 00 2 20)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNCARANO c0a (10 00 2 20)

This is the end of the printer test page.

One tasty boy

confidential

fax

To	**Schneider**
Fax Number	1-820-403-8443

From	**Ed & Linda Repp**
Fax Number	
Business Phone	
Home Phone	

Pages	2
Date/Time	7/21/2012 8:58:55 AM
Subject	Attn: Jake Morris

Here is my general fuel transfer req. wet form in the amount of $810.00. Thanks, Ed
Driver#31125 Truck#67150

« How to Stop a Calls from a Fax Machine?
How to Fix Vertical Strips On Faxes I Send »

How Can I Test My Fax Machine?

I just hooked up a new fax machine, and I'd like to test it, just to make sure it works. How can I do that?

Presumably, you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both:

To test the send functionality of your fax machine, send a one-page fax to 1 855-330 1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

To test the receive functionality of your fax machine, point your web browser to FaxZero; this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

▶ x
Desktop
Management System
Easy-to-use & Affordable
Desktop Management
Software. Download Now!
manageengine.com

TEST FAX

BACKOFFICE

1-888-877-1655

OR

1-503-206-BUD

My Shoes

ARE

GREAT !

7-14-11

[redacted]

~~Test 1 - 7-14-11~~ NG

~~2~~ NG

~~Test 3 - 7-14-11~~ NG

Test 4 7-14-11

Test Fax

De artn
Service
Personal
APPLIC

Happy Memorial Day!!

Congrats J on your Graduation!

We will see you soon & give you a gift. . .

Love,
Thomas & Nicole

HP LaserJet Pro MFP M127fn

Fax Self Test

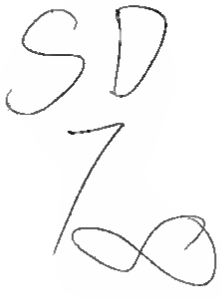
[illegible]

The fax detects an active telephone line	Pass
Phone Cord Connected to Correct Port on Fax	Pass
Telephone line current test	Pass
Dial Tone Detection	Pass

Your HP device has passed the fax test.

The fax settings can also affect the performance of your HP device. Please check your current fax settings listed below

[illegible]	Superfine
Default Lighter/Darker	<---*--->
[illegible]	[illegible]



Test Print

This machine is now ready for printing

Quick Menu for smooth access to Canon's web service and to various functions for photo printing and video printing

(1) Shortcut Menu
(2) Image Display

After this, Quick Menu opens automatically

When you click the [CREATIVE PARK PREMIUM] icon on the shortcut menu, My Image Garden opens. You can then download artworks of famous art sites and print them for various uses.

*CREATIVE PARK PREMIUM is a premium content service available exclusively to customers who use genuine Canon Ink for all colors. To use this service, you must have My Image Garden installed on your computer.

When My Image Garden is installed, Image Display also opens.

Image Display displays a slide show of artwork images that were created automatically by the recommended artwork function of My Image Garden, as well as other images saved on your computer.

just testing

We live on an island surrounded by a sea of ignorance. As our island of knowledge grows, so does the shore of our ignorance

— John Archibald Wheeler

TEST

TEXT FAX 1x1
TO LET ME KNOW YOU GOT THIS THANKS!

THIS IS A TEST !

From Metal#2

Last Transmission

Feb. 17 2012 22:54

Name

Tel

Date	Time	Type	ID	Duration	Pages	Result
Feb 17	22:53	Send	*99 12063936660	00'00	0	No Answer

A communication error has occurred during the fax transmission.
If you are sending, please try again and/or call to make sure the
recipient's fax machine is ready to receive faxes

FAX TRANSMITTAL

TO **1-888-hpfaxme (1-888-473-2963)**

From HP Customer

Presumably, you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both:

To test the send functionality of your fax machine, send a one-page fax to 1-888-877-1655 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

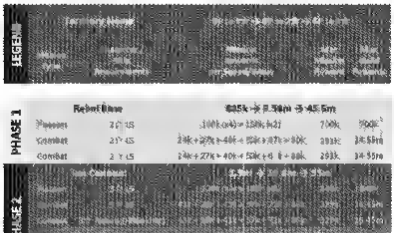
To test the receive functionality of your fax machine, point your web browser to FaxZero; this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

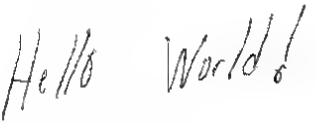
If you do have access to a fax machine — even a borrowed one — an easy workaround is to let it take the call, see who the fax is from, and call or fax them back to explain the problem. If you don't have a fax machine but do have Caller ID, it should be easy to identify where the fax is coming from; call or fax the sender's number and ask them to cut it out. Dialing *69 isn't likely to help; you'll probably just call the fax machine back.

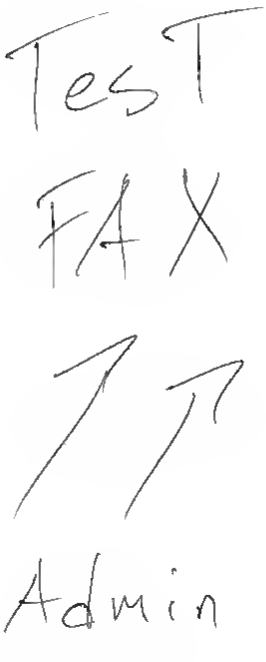
Calls from fax machines usually come in pairs or threes, because after the fax machine fails, it tries again a few minutes later. Use this to your advantage: once the first call happens, forward your incoming calls to a friend's fax line (or to a free fax service like eFax.) When that second call comes, it will print out on the friend's machine.

TERRITORY BATTLES
PHASE INFORMATION TABLES

by PyroFly




Hello World!


TesT
FAX
Admin

Pen Drive Data Recovery v2.0.1.5 + SERIAL

Download USB drive data restoration retrieval utility retrieve not detected not visible and inaccessable files lost due to deletion format Virus attack, corruption damaged file system etc. Pen drive recovery utility can restore formatted memory stick JPG JPEG GIF BMP digital photos pictures images Word Excel Access PowerPoint DOC XLS MDB PPT office documents file retrieve MPEG MOV DAT MP3 WAV MIDI audio video music songs Removable media USB DRIVE DATA RECOVERY SOFTWARE is Non-Destructive Read only and safe easy tool to recover accidentelly deleted files folders USB external drive data recovery utility support windows XP 2003 2000 ME NT 98 Software provide support for multimedia card compact flash memory card SD card removable micro drive smart drive media flash card memory etc Thumb drive data recovery software provide recovery from 64MB 128MB 256MB 512MB 1GB 2GB 4GB capacity

Features

* Pen drive memory stick data recovery software support windows XP 2003 2000 ME NT 98 and provides recovery from all capacities e.g. 64MB 128MB 256MB 512MB 1GB 2GB 4GB etc

* Utility can restore DOC XLS MDB PPT MPEG MOV DAT MP3 WAV MIDI JPG JPEG GIF BMP files of digital pictures photos audio video songs and office documents

* Software restores the data even the message DRIVE NOT FORMATTED displayed

* Utility provide recovery form USB pen drive even data has been accidentally deleted or formatted

* Provides files folders recovery from damaged corrupted virus infected pen drive

*Support all type of USB drives and memory sticks including SanDisk AVB Kingmax Apacer Lexar PenDrive PQI Rideta Supermedia Super Flash Transcend Kingston Sony generic Corsair PNY Simple Rtek Crucial Dane Elec Viking

* Ensures recovery even if the removable media (pen drive) is not detected or inaccessible

Fax Message

Date 1/14/20 2 Time 1:22 PM

To Fax User

Company

Fax Number 9031061300

From Holt

Subject: Holt

Total Number of Pages (including cover) 1

Name Holt

If all pages were not received, please call back immediately.

How do we use your information?

First we'll ask some basic questions about each person. Then we'll ask about income, current health insurance, disabilities and Tribal ancestry.

We'll keep all the information you provide private, as required by law. See our privacy policy in the *Application Guide* for more information.

Who to include on this application

We need you to tell us about yourself and everyone else in your household. Your household includes the people below:

- You
- Your legal spouse
- Your children. Include children of all ages who you claim as dependents on your taxes.
- Your live-in partner if you have a child together
- Anyone else you include on your federal income tax return, even if they do not live with you

Important: *Is someone living with you who is not on the list above? If they want health coverage, they must fill out a separate application.*

Please write clearly and provide as much information as possible about each person when filling out this application.

If you are applying for more than four people, please make copies of pages 5-6 and complete them for those people.

STEP 1 TELL US ABOUT YOURSELF You'll be our primary contact

1. Legal name (first, middle, last and suffix)	2. Maiden or other names used (first, middle, last)

3. Social Security number (SSN) – An SSN is required for everyone who is applying for health coverage and who has one. An SSN is optional for others, but providing an SSN can speed up the application process.

SSN ☐ No ☐ Applied for SSN ☐ Newborn ☐ Don't have SSN ☐ Not eligible for SSN ☐ Refuses to obtain SSN

4. Birthdate *(MM/DD/YYYY)*	5. Sex: ☐ Male ☐ Female	6. Phone number: ☐ Home ☐ Work ☐ Cell ( )

7. Do you live in Oregon? Answer yes, even if you are in Oregon to look for work or because of a job. *Only answer if you are applying for health coverage for yourself.* ☐ Yes ☐ No

8. Email address

9. Home address **(skip to #15 if you don't have one)**			10. Apartment/Unit #
11. City	**12. County**	**13. State**	**14. ZIP code**

15. If you don't have a home address, please tell us where you spend the majority of your time and then give us a mailing address (#16). County: _____ State _____ ZIP code _____

16. Mailing address (only required if different from home address)		17. Apartment/Unit #
18. City	**19. State**	**20. ZIP code**

DGI

Test FAX

4AB766

Fax

Recipient:
fax toy

FAX. 18553301239

Sender fax toy

Address:

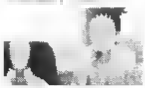
TEL.
FAX. 18553301239

Number of Sheets. 1 page(s) including cover
Date: Saturday, August 26, 2017

Subject: test page

test

TEST



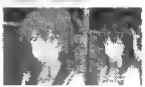
Episode 39
Episode 40

Ms. Koizumi Loves Ramen Noodles

pisode 1
Episode 2

IDOLISH7

Episode 2
Episode 3



Episode 1

citrus

Episode 1

One Piece: Whole Cake Island (783-current)

Ep sode 819
Ep sode 820

I sleep all night and I work all day

He's a lumberjack and he's okay
He sleeps all night and he works all day

I cut down trees, I eat my lunch
I go to the lavatory
On Wednesdays I go shopping
And have knittered scenes for tea

He cuts down trees, he eats his lunch
He goes to the lavatory
On Wednesdays he goes shopping
And has buttered scones for tea

I'm a lumberjack and I'm okay
(He's a lumberjack and he's okay)
I sleep all night and I work all day
(He sleeps all night and he works all day)

I cut down trees, I skip and jump
I like to press wildflowers
I put on women's clothing
And hang around in bars

He cuts down trees, he skips and jumps
He likes to press wildflowers
He puts on women's clothing
And hangs around in bars?

I'm a lumberjack and I'm okay
(He's a lumberjack and he's okay)
I sleep all night and I work all day
(He sleeps all night and he works all day)

I cut down trees, I wear high heels
Suspenders and a bra
I wish I'd been a girlie
Just like my dear papa

He cuts down trees, he wears high heels
Suspenders and a bra?

He's a lumberjack and he's okay
He sleeps all night and he works all day

He's a lumberjack and he's okay
He sleeps all night and he works all day

EPARTMENT

Printer Status Report

Product Information

1. Model Name: HP Officejet Pro 8610
2. Model Number: 8610
3. Serial Number: CN5A0FW073
4. Product Number: A7F66A
5. Services ID: 28001
6. Printer Zone (PX): 0
7. Firmware Version: FDP1CN1730AR
8. FW Patch Network: 0
9. Country/Region: US / 1
10. Duplexer: Installed
11. ADF: Installed

Print Usage Information

12. Total Pages Printed: 127
13. Total Color Pages Printed: 64
14. Borderless Pages Printed: 4

Connectivity Settings

15. Network Settings: Online
16. Active Connection Type: Wireless
17. URL: http://192.168.1.3
18. Hostname: NPI1B08C
19. Admin Password: Not Set

Scan Settings

20. Front Panel Destinations List: 0
21. Scanner Glass Test: Not Run

Scan Usage Information

22. Pages Scanned: 2
23. Scans From ADF: 0

Fax Settings

24. Fax Speed: Medium(14400)
25. Backup Fax Reception: On
26. Fax Forwarding: Off
27. Auto Answer: On
28. Rings to Answer: 5
29. Distinctive Ring: All Rings
30. (ECM) Error Correction Mode: On
31. Fax to PC: Off
32. Digital Fax: Send
33. Digital Fax: Network

Fax Usage Information

34. Faxes Sent: 5
35. Faxes Received: 0

Ink Delivery System Information

36. Ink Supply:
37. Estimated Ink Level:

	Magenta	Cyan	Yellow	Black
	[ ]	[ ]	[ ]	[ ]
38. Cartridge Number	HP 951 SETUP	951XL	951XL	HP 950 SETUP
39. End of Warranty Date (Y-M-D):	2017/09/08	--		2017/08/27
40. First Installation Date (Y-M-D):	2016/01/01	2017/10/06	2017/10/06	2016/01/01
41. Ink Zone:	1	1	1	1
42. USE	0	0	0	0
43. HP:	1	0	0	1
44. Approximate Pages Remaining:	Low	OK	OK	408
46. Supported Ink Cartridges**:	HP 951XL HP 951	HP 951XL HP 951	HP 951XL HP 951	HP 950XL HP 950

**Not all cartridges are available in all regions.

Print Head Information

46. Pen: 0
47. PHA Install Date in This Printer: 2016/01/01
48. HP: 0

Additional Assistance

For more information about how to change settings and diagnose problems, see the user documentation for your device. This documentation is available on your computer after you install the software—either from the HP Officejet Pro 8610 Printer Software (Windows) or the Help Viewer (Mac OS).

Fax Test Setup

To verify that your product is setup correctly for Fax, run the Fax Test. You can access this test from the device control panel or from the HP Officejet Pro 8610 Printer Software.

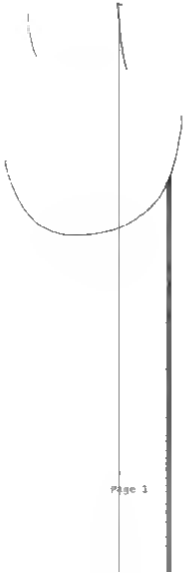
Wireless Network Test

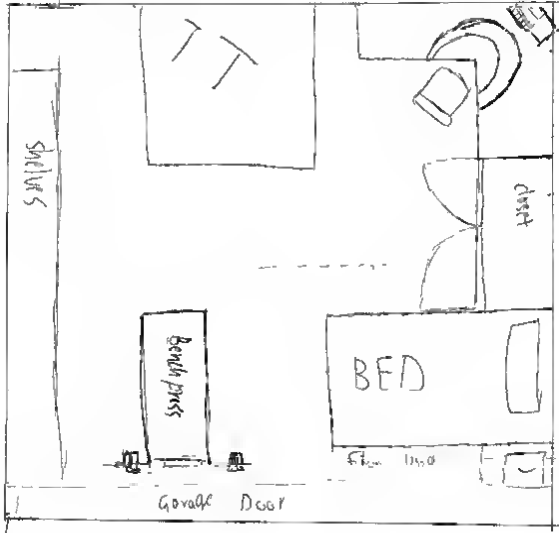
To verify your product is setup correctly for Wireless, run the Wireless Network Test. You can access this test from the device control panel.

boost
assurance
payLo

Wedding
White Frames

Test!




Shelves
closet
BED
Bench press
Garage Door

(888) 877-1655

Expedia Cancellation

Monday, April 27, 2015

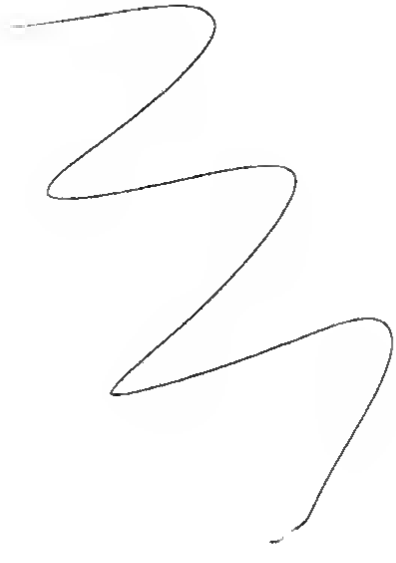
Cancellation Confirmation
21864321-505-3215
Cancel: 04/27/2015 10:16:49 GMT

Dear Ajesh Chandran

Number of Rooms	1	Number of Nights	1
Check-in Date	May 2, 2015	Check-out Date	May 3, 2015

Total Fee:	$0.00	Total Refund:	$0.00

Special Request: Expedia Booking ID:52265338 Smoking Preferences: Non-Smoking



Quick Start Guide

Model: MSTFORD05477

E

Test

#1

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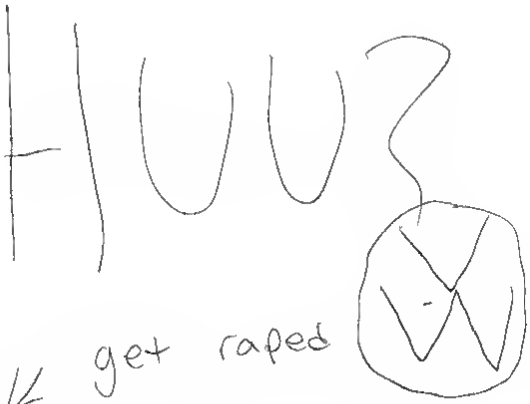
When you FART

you Fart



TEST TEST TEST TEST TEST TEST

To **Fax Toy**

From **Stro**

Our fax number **5555555555**

©1994 by Dan Scrap Press. Download this fax cover sheet and more from www.FaxPrintable.net.

2013 Change Calendar

2/27 All associates meeting

3/25- 3/27- CHNC and All associates meeting

3/31- Data Center Move- Coyote

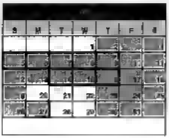
3/1- 3/31-Data Center Move- Diamondback

4/1-4/4- Data Center Move- Central

4/5-4/7- Rockville Move Days

4/11-4/12- Data Center Move- Wildcat

4/26 All associates meeting



4/8-4/9- Data Center Move- Sundial

4/14 5/11 Choice associates Conversion

5/27 Memorial Day

7/4 Fourth of July Holiday

7/19 All associates meeting

9/2 Labor Day

11/28-11/29 Thanksgiving Holiday

12/25 Christmas Holiday

- Freeze days associated with holidays
- Freeze days associated with Choice events
- Freeze days associated with Data Center Move
- Freeze days associated with the Rockville Building move

Sean

My test
doc

TE
ST
FA
X
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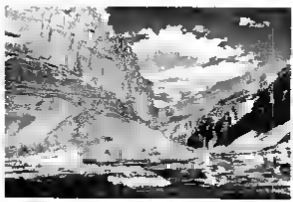
OM
ME

Gravida nisl aliquet

Sed et lacus quis enim mattis nonummy

Lorem ipsum dolor

Lorem ipsum dolor sit amet, consectetuer adipiscing elit. Nullam pretium rhoncus turpis. Integer fermentum enim mi, eget vestibulum volutpat. Nisl diam mus turpis est, vel tempus risus nunc nec nisl. Aliquam sit magna tincidunt. Maecenas aliquam mi in ligula. Vestibulum accumsan nec, sit amet, nonummy. Duis mattis, augue id tempor aliquam.



Aenean dignissim pellentesque nunc. Duis porta pretium dolor. Suspendisse aliquet, sem ut adipiscing sollicitudin, sapien odio malesuada nisl, vel volutpat nisi purus nec pede. Suspendisse dapibus libero rhoncus. Etiam congue, nisl vel volutpat mattis, pede metus tempus nisl, in pharetra nisi nisl sed sapien. Integer imperdiet lectus quis justo. Integer tempor.

Aenean dolor. Vestibulum ante ipsum primis in faucibus orci luctus et ultrices posuere cubilia Curae; Nunc nulla. Fusce risus nisl, viverra et, tempor et, pretium in, sapien. Donec venenatis vulputate lorem. Morbi nec metus. Phasellus blandit leo ut odio. Maecenas ullamcorper, dui et placerat feugiat, eros pede varius nisi, condimentum viverra felis nunc et lorem. Sed magna purus, fermentum eu, tincidunt eu, varius ut, felis. In auctor lobortis lacus. Quisque libero metus, condimentum nec, tempor a, commodo mollis, magna. Vestibulum ullamcorper mauris at ligula. Fusce fermentum. Nunc porttitor nunc a sem. Sed sollicitudin velit eu magna. Aliquam erat volutpat. Vivamus ornare est non orci. Proin mi. Aliquam gravida mauris ut nunc. Etiam suscipit commodo gravida. Maecenas lorem. Suspendisse potenti. Vivamus venenatis tellus non turpis. Fusce condimentum nunc ac nisi. Vivamus in erat ut urna cursus vestibulum. Fusce commodo aliquam arcu. Nam commodo suscipit quam. Quisque id odio. Praesent venenatis metus at tortor pulvinar varius.

This is A

Test

9/6/09

FAX TEST

1234567890

TESTING

TESTING

TESTING

B2MG2W

TEST FAX

FRESNO

This is a fax, sent over VoIP...

at 14400, let's see if it works.

Well did you know that you can use something other than g711/ulaw ??

Yup! In fact I normally use g726 for all my calls including faxing.

Sent via VoIP connection with G.726/24 at 14,400bps

Order 4819

View | Edit | Invoice | Affiliate Commissions | Payments | Log

This is a test

Test

Sviatoslav Feshchenko
Chartered Professional Accountant
Chartered Accountant

Capital Corporate Centre
226 9 Antares Drive
Ottawa ON K2E 7V5
613-912-8061
www.feshchenko.com

July 30 2013

To Owner
ANPAQ Home Improvements
Fax 1 613 738-0364

From Sviatoslav Feshchenko CPA, CA
226 9 Antares Drive
Ottawa, ON K2E 7V5
Tax 1 613 912-8062

Subject **Chartered Accountant professional services**

Dear Owner of ANPAQ Home Improvements,

My name is Sviatoslav Feshchenko I am a Chartered Accountant and would be delighted to have you as my client. As a full service accounting and tax practice, I offer a range of professional services suited to small and medium sized businesses including:

- Accounting (financial statement preparation (NFR) bookkeeping)
- Tax compliance (personal and corporate return preparation, HST returns payroll assistance)
- Tax advisory (tax minimization strategies, new business incorporation, corporate reorganizations owner manager remuneration planning and much much more)
- Tax dispute resolution (CRA audits reassessments, objections and appeals, unfiled returns (last 12 years), tax amnesty (voluntary disclosure) and more)
- Business acquisitions (asset vs shares analysis of tax implications, tax risk assessment)

My primary goal is to ensure you are always paying the least amount of tax while being in full compliance with tax law

I would like to extend my invitation to you for a no cost, no obligation consultation to discuss your particular circumstances and offer ways I can help you For more information on the services I offer please visit my website at www.feshchenko.com or call me at 613-912-8061

I sincerely appreciate the time you took in reading this letter Please feel free to contact me with any questions you may have or if you wish to book an appointment

Sincerely,

Sviatoslav Feshchenko CPA, CA

Volutone

PRODUCTS & PEOPLE YOU TRUST

Since 1921

2010 MANUFACTURER LINE UP

ATI

Atlantic Technology — Full speaker line including THX flush-mount and free-standing models and THX in-wall subs.

Thermal Management—Cooling products

AudioControl — Amplifiers, Processors, Receivers, Equalizers, Baluns

AudioSource — Amplifiers and Accessories

Extended Warranty Program

CALRAD Electronics — Connectors, Cables, Baluns, Switchers, and more..

Carlon — Flexible Conduit, Electrical Boxes, Rings, etc..

Channel Vision — Structured Wiring, A/V signal distribution, CCTV, IR

Chief — Mounting Solutions, Flat Panel, Projector

Da-Lite — Video Projection Screens

iPort — iPod Docking Products

Jamo — Flush-Mount, Free-Standing and Outdoor Speakers, Volume Controls

Dolphin Performance — Wiring Connectors and Terminations

Dynamat — Acoustic Isolation Products

Earthquake Sound — Subwoofers, Clearcove Amplifiers Flush-Mount and Outdoor Speakers

Extech Instruments, A FLIR Company — Electrical Testing Instruments

Fortress Seating — Home Theater Seating

HAI — Home Automation, Security, and Integration

Holland Electronics — Cable, Fittings, Splitters, and Accessories

Pioneer — Receivers, CD/DVD, Blu-ray, Speakers, Subwoofers (THIS LINE REQUIRES DEALER AUTHORIZATION)

ELITE — Receivers, CD/DVD, Blu-ray, Speakers, Subwoofers (THIS LINE REQUIRES DEALER AUTHORIZATION)

Platinum Tools — Tools and Terminations including EZRJ45 Connectors

JVC — DILA Video 1080p Projectors, LCD Flat Panels, Blu-ray (THIS LINE REQUIRES DEALER AUTHORIZATION)

Digital Watchdog

WWW.VOLUTONE.COM

Hello, It is working

Date 05/13/11

Total number of pages 1

To ,FaxToy

Fax number 1-888-877-4655

From ,Berman,Ben,STAMFORD,Information Services

Subject test 1

Test 1

r134ams0 vhdTestTextFile txt

test text file

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST

GLORY TO UKRAINE

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

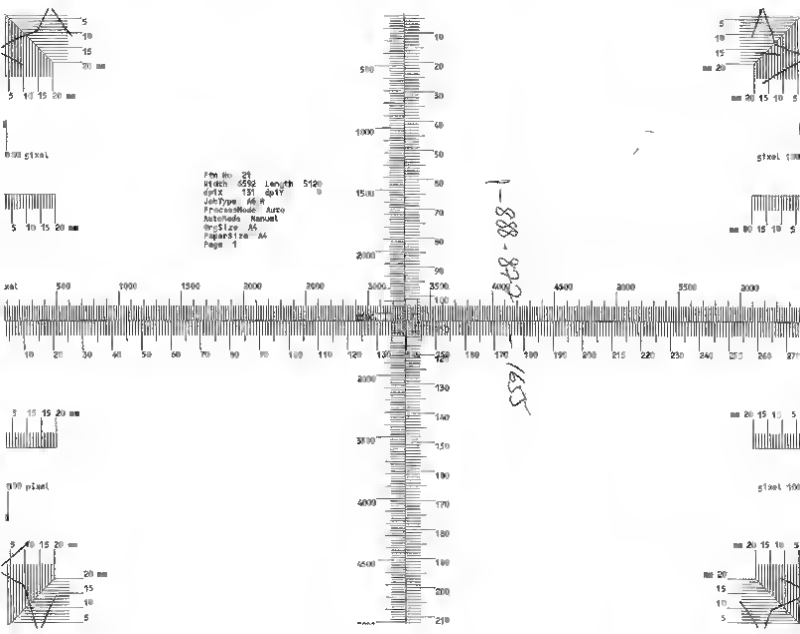
TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

FAX TOY TEST PAGE

To	<1-888-877 1655>
Fax number	1 888 877 1655
From	Pam Sabbatino
Fax number	(703) 726-6026
Business phone	
Home phone	
Date & Time	9/24/2013 10:54:04 AM
Pages	1
Re	

TEST TEST TEST


Pen No: 28
Width 6592 Length 5120
dpiX 191 dpiY 191
JobType A6-R
ProcessMode Auto
AutoFeed Manual
OrgSize A4
PaperSize A4
Page 1

6803

2

Chicken Egg Foo Yung

6 large eggs
1 cup shredded cooked, chopped
½ cup reduced-sodium soy sauce, divided
Freshly ground black pepper to taste
2 tablespoons Asian sesame oil
1 tablespoon vegetable oil
8 oz. shiitake, white parts and 4 scallions, green tops, sliced
2 garlic cloves, peeled and minced
1 cup bean sprouts, rinsed
1½ cups shredded cooked chicken
½ cup chopped water chestnuts
2 tablespoons oyster sauce
1 tablespoon hoisin sauce
1 tablespoon rice vinegar
2 teaspoons cornstarch

Preheat oven to 425 degrees. Whisk the eggs with 2 tablespoons chicken stock, 2 tablespoons soy sauce, pepper, Set aside.

Heat the sesame oil and vegetable oil in a skillet with oven-safe handle over medium-high heat. Add the scallions and garlic, and cook for 1 minute. Add the bean sprouts, chicken and water chestnuts, and cook for 3 minutes.

Reduce the heat to medium, add the egg mixture and cook for 4 minutes, or until the bottom of cake is lightly brown. Transfer the skillet to the oven, and bake for 10 to 15 minutes, or until top is browned.

While the eggs bake, make the sauce. Combine the remaining stock, remaining soy sauce, oyster sauce, hoisin sauce, vinegar and cornstarch in a small saucepan, and whisk well. Bring to a boil over medium-high heat, stirring frequently. Reduce the heat to low, and simmer the sauce for 2 minutes, or until slightly thickened. Set aside.

Run a spatula around the sides of the skillet and under the bottom of the cake to release it. Slide the cake gently onto a serving platter and cut it into wedges. Serve immediately, passing sauce separately.

Note: The sauce can be prepared up to 2 days in advance and refrigerated, tightly covered. Reheat it over low heat. The vegetables can be cooked up to 6 hours in advance and kept at room temperature. Reheat them over medium heat before adding the eggs.

Makes 4 to 6 servings.

Variations: Add 1 tablespoon Chinese chili paste with garlic or 2 teaspoons hot & spicy dash. Substitute cooked lamb shrimp, roast pork, or cubes of firm tofu for the chicken.

Test Fax

WAKE UP CALLS

DATE _____

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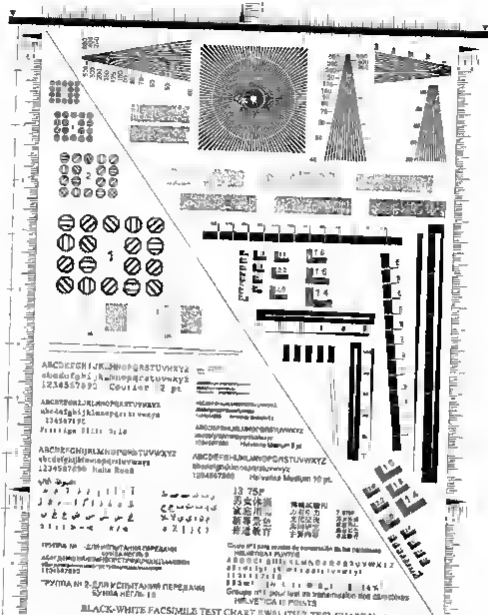
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RESULT	NO STOP

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COMPANY	DATE Monday November 14 2016
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TOTAL NO. PAGES W/O COVER 00	PERSONAL PHONE
CC:	EMAIL Chavez.Margarita@cusd80.com

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Fax number	18888771655
From	Larry
Fax number	Hammond
Business phone	
Home phone	
Date & Time	10/12/2013 8:45:41 AM
Pages	1
Re	testing

define list, noun1 and get synonyms. What is list, noun? list noun1 meaning, pronunciation and more by Macmillan Dictionary

List Definition - MSDN - Microsoft

https://msdn.microsoft.com/en-us/library/...4d6d0f54?(vs.85).aspx

A container for StyleSpecification and TerrainAgent. Example. The following example creates a new list, definitionList, to which it will be added an add Then the list receives the list.

Definition Lists

http://www.w3.org/html/wg/drafts/html/...

A definition list is a list of terms and corresponding definitions. Definition <DL> <DT>List Header</DT> <DT>Item 1</DT> This is the definition of the first term.

Searches related to list definition

list and synonym	list antonyms
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Mark Watson
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November 11, 2008

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Date	Time	Type	Station ID	Duration	Pages	Result
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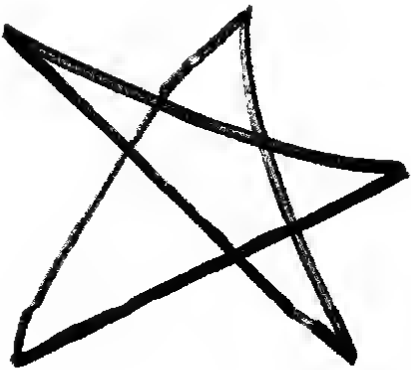

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Server Fax Setup

Server Fax Enabled: Disabled

Fax Forward Setup

Fax forward to Fax number: Disabled
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Media Trays

Media Trays: Tray 1
Paper Type: Plain Paper
Paper Color: White
Paper Size: 8.5 x 11
Media Trays: MP Tray
Paper Type: Plain Paper
Paper Color: White
Paper Size: 8.5 x 11"
Media Trays: Tray 2
Paper Type: Plain Paper
Paper Color: White
Paper Size: 8.5 x 11

Network Authentication Setup

Kerberos
Default Realm
Default Address: 0.0.0.0
Alternate1 Realm
Alternate1 Address: 0.0.0.0
Alternate2 Realm
Alternate2 Address: 0.0.0.0
Backup2 Address: 0.0.0.0
Server Message Block (SMB)
NT Domain
Backup Domain
Alternate1 Domain
Alternate2 Domain
Alternate3 Domain
Alternate4 Domain
Alternate5 Domain
Alternate6 Domain

Accounting Setup

Accounting Mode: Disabled
Authentication Mode: Disabled

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WF-3620

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Sep.07.2015 01:57 PM

Name
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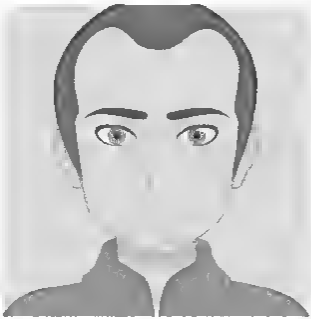
Check Items

	Product Hardware Check	PASS
2	Phone Cable Connection Check	PASS
3	Connection Test Check	PASS
4	Phone Line Columes for Quality Check	PASS
5	Dial Tone Detection	PASS

Status :
The fax connection is OK

Testing
1, 2, 3



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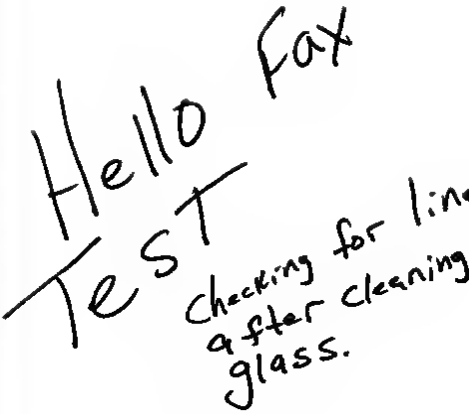
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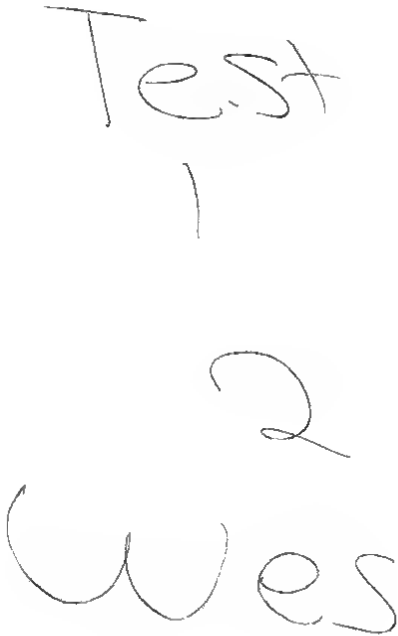
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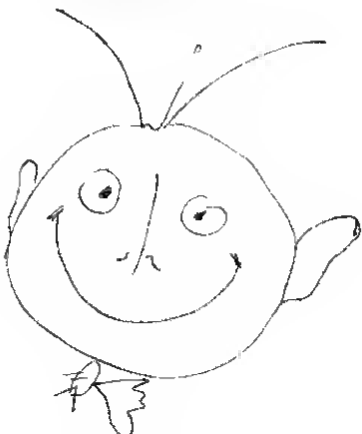

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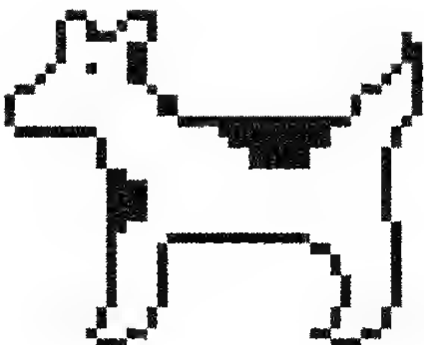


IF NO: We will be sending you the form in the mail today. When you receive it, please sign it and mail it back to us, so that we can process your application for free meds. We will also include a checklist with all of the income verification documents that we need from you highlighted on it. Please send in everything that is requested from you at the same time. Your application for free meds will be rejected or denied if we do not send it in with everything that is required. If you have a pen handy, I can go over all of the documents that you need to get with you. **(IF POSSIBLE, review income documentation checklist with client)** Please get the income documentation together today, so that you can mail it back with the signed waiver form as soon as possible.

Lastly, as I stated before, there will be a minimal monthly processing fee of $20 per med per month for this service. There is also a one-time enrollment fee of $39.99. The meds are free, including shipping. However, the processing fee is $39.99. (You could also process all the paperwork for each medication by yourself, but what we have found is that most people either make mistakes, don't complete all the paperwork as it is needed, don't send in all the documents necessary, or don't send in their refill paperwork on time. This is true for the more than 44 million people that qualify for the program. This monthly fee covers the cost of us doing that for you and making sure that you qualify for your free meds each time, every time. Of course, we need your cooperation to make that happen. But if you do what we have asked of you, you will almost always be approved for your free meds.) Do you have a checking account information ready?

IF NOT: Do you have any family member, friend or relative that will pay for it using their account information on your behalf?

IF YES: Can we process your payment right away, or when should we process it? We just want to be sure that nothing bounces and costs you more money in fees, because we're in the business of saving you money. (record information accordingly)

IF PROCESSING CHECKING ACCT INFO: Complete transaction by inputting the answers to the following.

1) What is the name of your bank?

2) What is your bank's ROUTING number? Your routing number is on the bottom left hand side of your check, between the two computer symbols. (Record number and read back to customer, or read back each digit as they tell it to you and then verbally reverify the entire number)

3) What is your CHECKING ACCOUNT number? Your checking account number is the next set of numbers, which also ends with a computer symbol. (repeat account number reverification process.)

IF PROCESSING CREDIT / DEBIT CARD INFO:

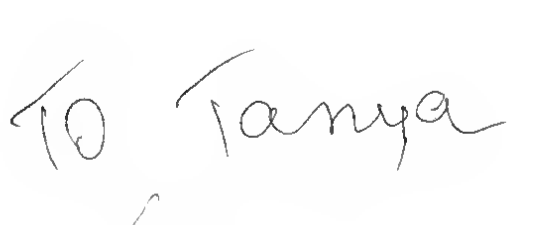
1) Is there are Mastercard or Visa logo on your card?

2) What is your card number?

3) What is the expiration date?

4) What is the name EXACTLY as it appears on the card?

5) What is the 3-digit card verification number on the back of the card?


To Tanya
From
Renee

Introduction

We will be replacing the IO Data Center 4351 router The purpose of this test is to demonstrate basic connectivity and EIGRP is configured correctly

Also, during the replacement of the router the Century Link MPLS network will down The voice traffic should fall over to the ATT@T MPLS network We will remotely access each site and a make a test voice call The goal is to

Pre-Testing Data Gathering:

From existing router 10.10.110.12 HSH JO-4351-02 copy output from Show IP Route Show IP Protocols, Show IP EIGRP Topology Show IP EIGRP Interfaces Completed

Verify Power and Network Cables

Test 1 Procedures:

The test plan is to demonstrate that the basic connectivity and routing protocol are configured correctly

- Test 1 Baseline Connectivity Test
- Verify physical and IP connectivity between devices on the HSAG network.
- Collect operational baselines.
- Demonstrate IP connectivity between devices on different IP segments
- Demonstrate the EIGRP routing protocol

Test with docx

12132042843

Kelly Johnson

LSELF

Northwest Arkansas Pathology Associates, P.A.
390 E. Longview Street
Fayetteville Arkansas 72703
(479)442-0144

Breast Panel Patient Report

H&E

No Image Available

HercepTest™

Diagnostic Data						
Assay Results				Reference Range		
Assay Name	Intensity Score	Percent	Result	Favorable Negative / Low	Borderline Intermediate	Unfavorable Positive / High
Her-2 Assay	N/A		N/A			
Estrogen Receptor	N/A		N/A	>= 1% (Favorable)		< 1% (Unfavorable)

Assay Description and Limitations

Assay Description: [text illegible] is immunohistochemical assay for detection of HER2 protein overexpression in the above breast infiltrating carcinoma tissue specimen. Assay is performed on formalin-fixed, paraffin-embedded tissue sections using [illegible] monoclonal antibody. Results are interpreted according to manufacturer's instructions. Limitations: Incorrect fixation of tissue specimen may result in false-negative or false-positive results. Only [illegible] should be used for diagnosis of breast cancer patients. Assay validated on [illegible] tissue specimens. Clinical utility of positive and negative results has been established for breast cancer patients in trials [illegible] and [illegible]. Refer to package insert for instructions, warnings, precautions, and limitations.

Estrogen Receptor (ER): Immunohistochemical staining was performed on the above specimen using [illegible] monoclonal antibody. Results are interpreted according to manufacturer's instructions. Limitations: Incorrect fixation of tissue specimen may result in false-negative or false-positive results. Only [illegible] should be used for diagnosis of breast cancer patients. Assay validated on [illegible] tissue specimens. Clinical utility of positive and negative results has been established for breast cancer patients in trials [illegible] and [illegible]. Refer to package insert for instructions, warnings, precautions, and limitations.

Progesterone Receptor: [illegible] monoclonal antibody was used for the qualitative immunohistochemical staining of formalin-fixed, paraffin-embedded tissue sections. Results are interpreted according to manufacturer's instructions. Limitations: Incorrect fixation of tissue specimen may result in false-negative or false-positive results. Only [illegible] should be used for diagnosis of breast cancer patients. Assay validated on [illegible] tissue specimens. Clinical utility of positive and negative results has been established for breast cancer patients in trials [illegible] and [illegible]. Refer to package insert for instructions, warnings, precautions, and limitations.

Ki-67: [illegible] was used for qualitative and/or semi-quantitative immunohistochemical staining of Ki-67 antigen expression in formalin-fixed, paraffin-embedded tissue by automated immunostainer. Staining using the manufacturer's instructions.

p53: [illegible] monoclonal antibody was used for the qualitative and/or semi-quantitative immunohistochemical staining of human p53 protein in formalin-fixed, paraffin-embedded tissue sections. Results are interpreted according to manufacturer's instructions. Limitations: Incorrect fixation of tissue specimen may result in false-negative or false-positive results. Only [illegible] should be used for diagnosis of breast cancer patients. Assay validated on [illegible] tissue specimens. Clinical utility of positive and negative results has been established for breast cancer patients in trials [illegible] and [illegible]. Refer to package insert for instructions, warnings, precautions, and limitations.

Electronically signed by Alfred Lui, MD

For detailed information on any of the tests performed, as well as clinical references, please refer to the individual test reports.

CPT Codes CPT Code!

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1	3833840001199	000	PS2 KINGOFFIGHTERS 98 ULT MATCH	5	0	5		
2	7127294006575	000	360 G-FORCE	3	0	3		

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9.02.09

ADIRX TOTAL SHIP QTY 8

Any claim for damaged merchandise should be filed with carrier at time of delivery. Other claims, if any, should be filed and faxed to Pioneer Distributors, Inc. within 2 days from date of delivery. No returns will be credited to your account without a return merchandise number. A 2% monthly service fee will be added to your account for late payment. A 15% charge will be passed to your credited for returned checks.

FACSIMILE Cover

January 3 2017

TO		Fax No.	Telephone No.
Test Fax		1-855-330-1239 1-855-33-1239	none
Sender's Telephone Number		Alternate Telephone Number (Optional)	
202-942-5999		none	
FROM	Test ONLY	Sender's Room Number	none
	none	Timekeeper Number	none

Number of pages being transmitted including the cover page 1

RE **To test the send functionality of your fax machine,** send a one-page fax to 1-855-330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.Test Fax

If you experience difficulty receiving this fax transmission, please contact the operator at ,

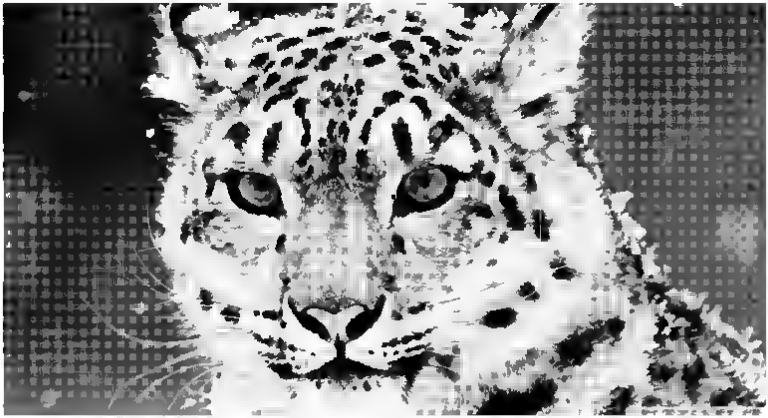
ORIGINAL DOCUMENTS Will follow by ☐ mail ☐ courier -- OR ☒ Will not follow unless requested.

PRIVILEGED AND CONFIDENTIAL: Information intended only for the use of the addressee named above. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, please note that any dissemination, distribution or copying of this communication is strictly prohibited. Anyone who receives this communication in error should notify us immediately by telephone and return the original message to us at the above address via the U.S. Mail.

TEST
FAX

no errors plz!

RUAN



Insight.com

Wednesday, September 04, 2013

Registering Confirmation
[redacted]
Created [redacted]
Booking Source: [redacted]

Dear [redacted],

Thank you for your recent order. Please review the information below and contact us immediately if you have any questions. You may also view your order online at [redacted]. Call International Support Team at 1-800-[redacted] or [redacted]@insight.com

Sincerely,
Insight

Customer Information

Please verify that all information below is correct. If you need to change any of the information, please contact your Insight Account Manager.

Bill To:	[redacted]	Ship To:	[redacted]
Address:	[redacted]	Address:	[redacted]
Attn:	[redacted]	Attn:	[redacted]
Email: [redacted]		Phone:	[redacted]

Payment Information

Credit Card	Visa	Expiration Date	[redacted]
Credit Card #	[redacted]	Authorization	[redacted]

Shipping Details

Number of Items:	1	Number of Lines:	1
Estimated Ship Date:	[redacted]	Ship Via:	[redacted]

Items Ordered

Item Number	Description	Unit Price	Extended Price
[redacted]	[redacted]	[redacted]	[redacted]

Subtotal:	[redacted]
Shipping & Handling:	[redacted]
Total:	[redacted]

Shipping Instructions: [redacted]

nxfhgx

Thursday April 17, 2008

Reservation Confirmation
[redacted]
Created: [redacted]
Booking Source: Kayak

Dear [redacted],

Thank you for choosing Lone Star Courier.

Please review the information below carefully. If you find any discrepancies, please contact us immediately at 1-800-[redacted]. Failure to do so may result in additional charges. Please note that all times listed are in Central Daylight Time.

Sincerely,
Lone Star Courier

CUSTOMER INFORMATION

Please verify that all information is correct. Failure to provide accurate information may result in delays or additional charges.

Booked by:	Cecilia Trejo	Email:	[redacted]
Address:	[redacted]	Phone:	[redacted]
ID:	[redacted]	Loyalty:	[redacted]
Email Address:	[redacted]	Phone Number:	[redacted]

SHIPMENT INFORMATION

Service:	Next Day Air	Type:	Letter
Created:	[redacted]	Weight:	0.5 lbs

PACKAGE DETAILS

Number of Items:	1	Number of Packages:	1
Declared Value:	$0.00	Package Type:	Customer Supplied

SHIPPER INFORMATION

First Name:	Cecilia	Last Name:	Trejo
Phone Number:	[redacted]	Fax:	[redacted]
		Email:	[redacted]

Total Charges: $0.00
Total Weight: 0.5 lbs

Note: Items are subject to inspection. Prohibited items may result in additional charges.

Terms and Conditions

By using Lone Star Courier's services, you agree to the following terms and conditions. Lone Star Courier is not responsible for any damages or losses that occur during shipping, except as required by law. Claims must be filed within 9 months of the shipping date. Lone Star Courier reserves the right to refuse any shipment that does not comply with our policies. For more information, please visit our website or contact customer service.

Thank you for choosing Lone Star Courier!

Fax Answers

answers to your questions about faxing

« How to Stop a Calls from a Fax Machine?
How to Fix Vertical Stripe On Faxes I Send »

Ethernet 10/100/1000

Standard Network Card

Status	Not Connected
Speed, Duplex	Unknown/a (Auto)
Energy Efficient Ethernet	Off
802.1x	Disabled
Current Date and Time	2016-01-11 09:49
End-of-Job Timeout	90
UAA (MAC)	0021B78947EB
	[redacted]
Firmware Version	NH.GM.N436
Network Compute Infr	24 Apr-14 18:46 mla-hld

Integrated Network Option Settings

Printer Type	Lexmark CX410de

TCP/IP

Active	On
Enable DHCP	Off
Enable BOOTP	Off
Enable RARP	Off
Enable AutoIP	No
Address Source	Manual
IP Address	192.168.1.203 Not Connected
Netmask	255.255.255.0
Gateway	192.168.1.1
Fully Qualified Domain Name	Dock-Printer.Coastal.local
WINS Status	Unregistered
WINS Server	0.0.0.0
DNS Server Address	192.168.1.7
Backup DNS Server Address	192.168.1.12
Enable DDNS	Yes
Enable mDNS	Yes
Bonjour Name	Lexmark CX410de

IPv6

Active	On
Fully Qualified Domain Name	Dock-Printer.Coastal.local
DHCPv6	On
IPv6 Address Source	Automatic
IPv6 Address	fe80::221:b7ff:fe89:47eb

AirPrint™

Active	Yes

AppleTalk*

Active	No
Name	ET0021B78947EB Lexmark CX410de
Type	LaserWriter
Zone	*
Address	0.0

AirPrint is a trademark of Apple Inc.
*AppleTalk is a trademark of Apple Inc.

6200 1111

740 11

760 1

780 1

Bmon

Bphon

1644

12460

12020

MGM GRAND DETROIT

1777 Third Street
Detroit, Michigan 48226-2561

Main Switchboard (313) 465-1777
Room Reservations (866) MGM-DETR
Website: www.mgmgranddetroit.com

$25.00 New Casino Chip On Tables

$1.00 New Casino Chip On Tables

$2.50 New Casino Chip On Tables

$5.00 New Casino Chip On Tables

$25.00 New Casino Chip On Tables

$100.00 New Casino Chip On Tables

FAX

Recipient.	Mr Test TEST TEST	Sender
		Address:
FAX.	1-888-577-1656	
		TEL: FAX.

Number of Sheets. 1 page(s) including cover

Date: Sunday, December 19, 2010

Subject: Tst

Test

tmst 123
123
123
123
123
123
123
123

KrlRog WAS here

Test Facility
123 Fake Street
Missoula, MT 59801

Fax Toy

Fax Toy

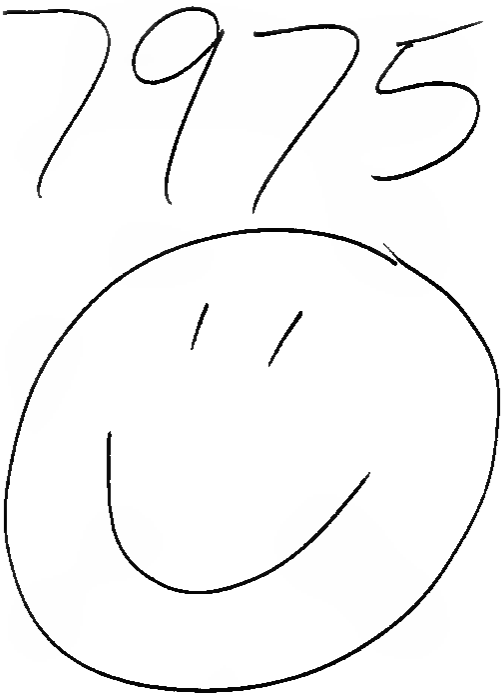
How are you? This is a test of the fax system and it looks like it is working splendidly!

Thank you,

Betty Demo

1668398128B

Test


7975

BACK OFFICE

TEST

FAX

1-855-330-1239

1-213-294-2943

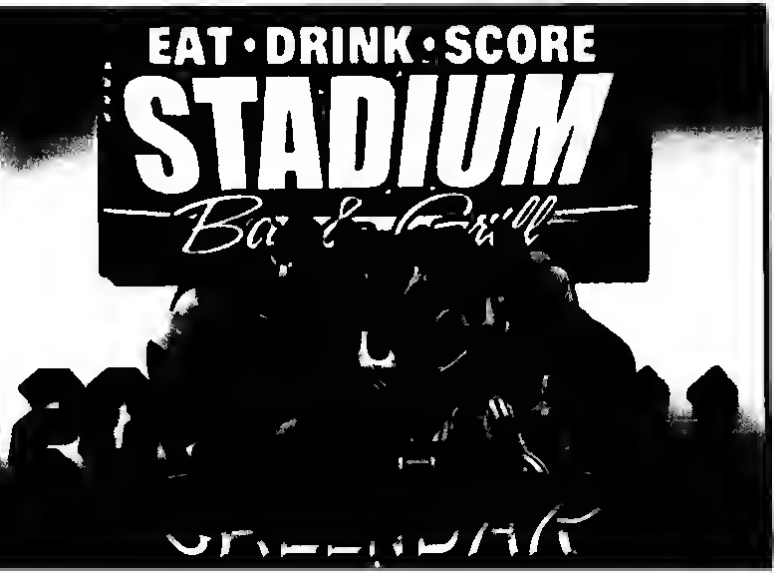
HP Officejet 8610
Personal Printer/Fax/Copier/Scanner

Log for
[redacted]
Aug 02 2010 9:00PM

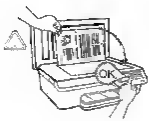
Last Transaction

[redacted]

Macs own PC's!


EAT • DRINK • SCORE
STADIUM

Remember me next time



IMPORTANT!

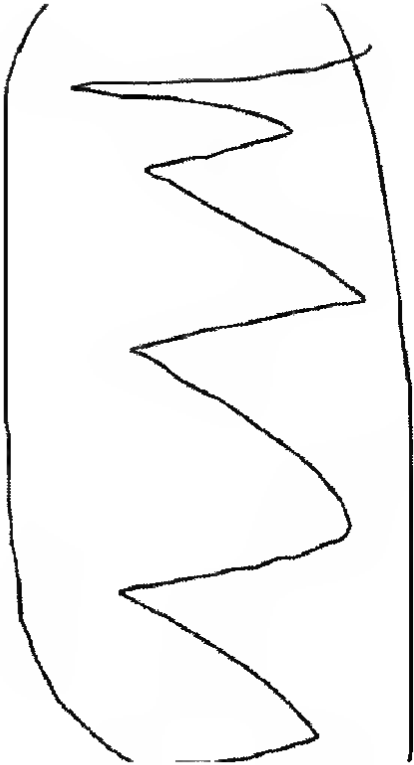
You must scan this alignment page for best print quality

STEP 1: **Lift the lid**. Place this alignment page face down on the right front corner of glass. Close the lid.

STEP 2: **Press OK**.

This is a test fax with my daughter on it.

She's pretty stinkin' cute



Windows Printer Test Page

You have correctly installed your HP Color LaserJet A4/Letter Hardware-Copy PCL6 Class Driver on CANPRIII.cec.lan.

PRINTER PROPERTIES

Submitted Time:	3:09:58 PM
Date:	7/1/2020
User Name:	[redacted]
Computer Name:	[redacted]
Printer Name	[redacted]
Printer Model:	HP Color LaserJet A4/Letter Hardware-Copy PCL6 Class Driver
Color Support:	Yes
Port Name(s):	10.1.10.161
Data Format:	RAW
Printer Share Name:	[redacted]
Printer Location:	[redacted]
Print Processor	winprint
Comment:	
Separator Page	
Location	
OS Environment:	Windows x64

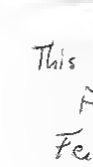
PRINT DRIVER PROPERTIES

Driver Name:	HP Color LaserJet A4/Letter Hardware-Copy PCL6 Class Driver
Driver Type:	Type 4 - User Mode
Driver Version:	63.9600.17415

ADDITIONAL PRINT DRIVER FILES

C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403dca09\amd64\hppcl6_CA_HWQP-manifest.l
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403cfa09\amd64\hpcCFGP6.GDL
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403dcd09\amd64\hpcPCL6_PipelineConfig.xml
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403dcd09\amd64\hpcefmw81.gpd
C:\Windows\System32\DriverStore\FileRepository\pmhpcl 3 inf amd64 428d1ec2403dcd09\amd64\hpcstw81.dll
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3 inf_amd64_428d1ec2403dca8\amd64\hpcffwd.d l
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403d~b0\amd64\hpcffwd.dll
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403dca09\amd64\hpcffwdext.uml
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403dcd09\amd64\hpcffcshext.ll
C:\Windows\System32\DriverStore\FileRepository\pmhpcl3.inf_amd64_428d1ec2403dcd09\amd64\hppcffcshext.uml
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8feb2dca56ca9f9\Amd64\UNIRES.DLL
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8feb2dca56ca9f9\Amd64\STDNAMES.GPD
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8fcb2dca56ca9f9\Amd64\STDDTYPE.GDL
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8fcb2dca56ca9f9\Amd64\STDSCHEMA.GDL
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8fcb2dca56ca9f9\Amd64\STDSCHMX.GDL
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8feb2dca56ca9f9\Amd64\MSMPSINC.GPD
C:\Windows\System32\DriverStore\FileRepository\ntprint. nf_amd64_e8fcb2dca56ca9f9\Amd64\PCLXL.DLL
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8feb2dca56ca9f9\Amd64\PCLXL.GPD
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8fcb2dca56ca9f9\Amd64\PSFONT.GPD
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8feb2dca56ca9f9\Amd64\PJL.GPD
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8fcb2dca56ca9f9\Amd64\PEDISP.GPD
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e8fcb2dca56ca9f9\Amd64\PCLSERES.DLL
C:\Windows\System32\DriverStore\FileRepository\ntprint4.inf_amd64_94436f11c08f1be6\Amd64\MSMPSPCL6.DLL

Test


This Is Not
A
Pen

TEST

FAX U

SO OLSZTYN

dup 65 /c41 put
dup 66 /c42 put
dup 67 /c43 put
dup 68 /c44 put
dup 69 /c45 put
dup 70 /c46 put
dup 71 /c47 put
dup 72 /c48 put
dup 73 /c49 put
dup 74 /c4a put
dup 75 /c4b put
dup 76 /c4c put
dup 77 /c4d put
dup 78 /c4e put
dup 79 /c4f put
dup 80 /c50 put
dup 81 /c51 put
dup 82 /c52 put
dup 83 /c53 put
dup 84 /c54 put
dup 85 /c55 put
dup 86 /c56 put
dup 87 /c57 put
dup 88 /c58 put
dup 89 /c59 put
dup 90 /c5a put
dup 91 /c5b put
dup 92 /c5c put
dup 93 /c5d put
dup 94 /c5e put
dup 95 /c5f put
dup 96 /c60 put

Wagner Test

NAWPP_ZZ

Asus RT-AC68W

Printer Test Page

Printer Name:	Samsung_M288x_Series___SEC30CDA7C8E233_
Description:	Samsung M288x Series (SEC30CDA7C8E233)
Location:	
Make and Model:	Samsung M288x Series-AirPrint
Media Dimensions:	8.50 x 11.00 inches 216 x 279 millimeters
Media Limits:	0.17 x 0.17 to 8.33 x 10.83 inches 4 x 4 to 212 x 275 millimeters
Driver Name	APSAMSUN.PPD
Driver Version	2.0

CUPS on OS X

Printer Test Page

Test Fax from Westley

Test Fax

Bipolar Resonator Level

Name _____ Date _____

Book title _____ Author _____

Pages Read _____

First, _____

Next, _____

Then _____

After that, _____

Finally, _____

Means Welch Browne, PC
800 W 47th St Ste 430
Kansas City MO 64112

To	<18888771655>
Fax number	18888771655
From	Dan Hodgson
Fax number	816-561-6288
Business phone	816-561 1400
Home phone	
Date & Time	4/5/2013 1 41 57 PM
Pages	1
Re	Test

Test

Coronado #1

1888 HPFAXME
1888 4732963

TOP

LEFT

12345678

Embedded Font ABC 123

Right 8 Point
Ten 10 Point
Twelve 12
Fourteen

X

US LETTER FAX TEST PAGE

X

Right 8 Point
Ten 10 Point
Twelve 12
Fourteen

© 2008 by FaxLogic LLC

RIGHT

BOTTOM

12345678

888-877-1605

503-200-1300

Test EFAX

BACKOFFICE

TEST

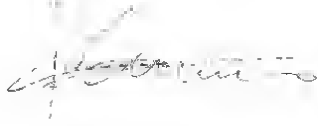
FAX

1 855-330-1257

1-213-291-2943

FAX TESTING

0101010101001010101010010
1010101001010101010010101
0101001010101010010101010
1001010101010010101010100
1010101010010101010100101
0101010010101010100101010
1010010101010100101010101
0010101010100101010101001
0101010100101010101001010
1010100101010101001010101
0100101010101001010101010
0101010101001001010101010



TEST

TEST

MDCD

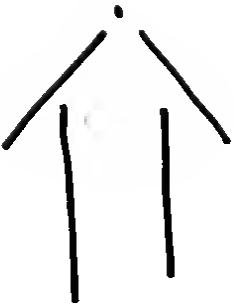
T: Available only when SSPCON register bits SSPM<3:0> = 1001

887-877-1655

2pages fax

Fax Toy

Random Stuff Sent From Your Fax Machine
Fax something interesting toll free to 1-855-330-1239 or 1-213-294-2943



There once was a man from nantucket

Mrs. Brandobundt frequently whines in a high, squeaky tone and is often mistaken for an incoming fax transmission.

Maui Jim

Available in prescription

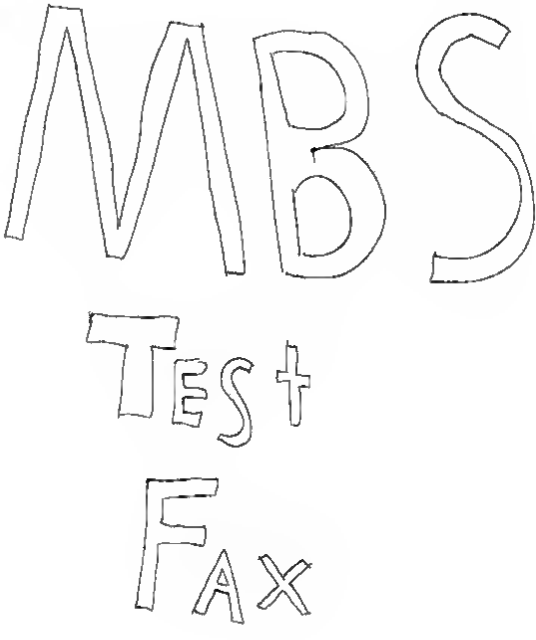
SHOWN: "HEIHEI"

Color Clarity. Detail.

At Maui Jim we're dedicated to bringing more color to your life with PolarizedPlus2® lenses that enhance clarity, reduce glare, and highlight depth and dimension. Maui Jim Sunglasses won't change the world... they'll change the way you see it.

Recommended as an effective UV filter for the eyelids and surrounding skin

ママ
ママのまねっこ


MBS
Test
Fax

Sending Confirm

Date : 30-JUN-2011 THU 20:19
Name :
Tel : 97491638

Phone	:	0019884732963
Pages	:	1
Start Time	:	30-JU 20:17
Elapsed Time		02'34"
Mode	:	G3
Result		Send Error

FAX

Date:	Wed Nov 09 16:31 PM AOT 2016
TO	
Fax Number:	16053011239
Name:	Bell Textile
FROM	
Fax Number:	8138317001
Name:	Brandon Brumbaugh
Company:	
Subject:	1217
Pages:	1

Notes:

test

Table 12.7 continued

Modifier	Function
	mind in place of the slash—for example, … final / can be omitted if followed … the delimiter (/ or your delimiter) or a … escaping it with a backslash (\)—for … user/ The search string s can be … search string of the previous s or … no previous s occurred, the string …
t	Removes all leading components of … filename part. For the word /usr/bin/…
x	Breaks the selected word or words … newlines.
&	Repeats the previous string-substitution … if & appears in the same command line. … !grep 2 h/bill/marty/ 118.8 … is the same as … !!:s 2 s/bill/marty/ 118.8 …

Normally a modifier affects only the first selected word. When … as with !:2* you can apply a modifier to all the selected words … modifier lasted. For example !:2-4* will apply the g modifier to … valid with the p, q, and x modifiers.

You can count the command sternfiler from a history substitution … expressions in the same line; successive history references then refer … the first. For example,

```
% vi `grep -l Acme.h *.h`
```

all refer to the same grep command but select the first, third, …

The history mechanism supports the special abbreviation ^ … keying error in the preceding line. The general form of this … are strange. The preceding command line is selected and … replaced with y and then executed. After the command … line !:s^bin^lib (or ^ b^l) to rename the command to … notebook character of the line to be recognized as a line-oriented … tion is available only for the immediately preceding command line. … tory expression !:s/^/sh /^ to edit any line other than the …

…pression of the history-substitution mechanism is th… …n begins (!) to isolate it from characters following it. … …with the selected history reference and ending: n …

…Subsection 7 to prevent confirmation of file removal. When … …this files, use the rm command to see the results. After you … …files are being removed, leave the rm command with the … …ought the user is trying to delete all publish-related C++ … …

```
…ers  publish.cc   publish.hh
…ks
…ers  publish.cc   publish.hh
```

…variables to hold temporary values, and shell scripts can … …interactive. The shell itself also has variables of its own … …ur own C shell and your C shell environments.

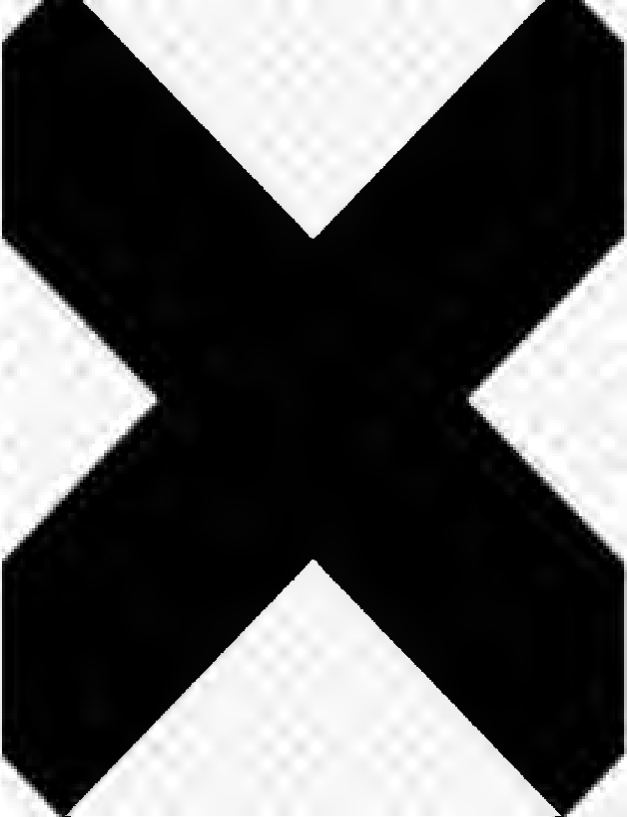
…ver some of the shell's memory are made to hold a serv… …determined by using a variable name. You assign the name … …variable as set command. You may change the value of …

…s. …mplest syntax set for referring to the value of a va… …ed on a command line, is replaced by the correspond… …ommand is executed. In an anyplace form, a variable … …command with its string value.

…ecial kinds of variables the C shell supports and the r… …ome variable values.

…ere are limits on the size of variable names. People ex… …ers, and names consisting of up to 16 of them … …

…ames consist of only letters (uppercase and lowercase), … …variable names begin with a digit, because numeric … …in the C shell. Generally, all capital letters are used for s… …shell uses some lowercase names for local variables, although …



Testing

TEST FAX

888-877-1655

ATLANTA DISTRICT PERFORMANCE CLUSTER
MAIL HANDLER
MAIL HANDLER ASSISTANT (MHA)

FUNCTIONAL PURPOSE:
Load, unloads, and moves bulk mail and performs other duties to support the movement and processing of mail.

DUTIES AND RESPONSIBILITIES

1. Unloads mail from trucks, separates all mail received from trucks and conveyors for dispatch to other conveying units and separation and delivery mail for delivery to distribution areas.

2. Places empty sacks or pouches on racks, labels them where prearranged or where racks are plainly marked, dumps mail from sacks, cut ties, facer letter mail, memes mail to distributors for processing, places processed mail into sacks, removes filled sacks and pouches from racks and closes and locks sacks and pouches. Picks up sacks, pouches and outside pieces, separates outgoing bulk mail for dispatch and loads mail onto trucks.

3. Cancels stamps on parcel post, operates canceling machines, carries mail from canceling machine distribution cases.

FUNCTIONAL REQUIREMENTS

1. Heavy lifting, up to 70 pounds
2. Heavy carrying 45 pounds and over
3. Straight pulling (8+ hours)
4. Pulling hand over hand (8+hours)
5. Pushing (8+hours)
6. Reaching above shoulder
7. Both hands required or compensated by the use of acceptable prosthesis
8. Walking (8+ hours)
9. Standing (8+ hours)
10. Repeated bending (8+hours)
11. Specific visual requirement (specify) 20/40 Snellen 1 eye
12. Ability to distinguish basic colors
13. Ability to distinguish shades of colors

ENVIRONMENTAL FACTORS

1. Outside and Inside
2. Excessive dampness or chilling
3. Excessive noise, Intermittent
4. Dust
5. Working around machinery with moving parts
6. Working around moving objects or vehicles
7. Working closely with others
8. Working alone
9. Irregular hours of work
10. Extended hours of work (overtime)
11. Other (specify) constant lifting and walking

WORK ORDER

From United Management Inc

Date: 3-22-2013

Issued to: Alpha Home Improvements

Behalf of: Coachwood Apartments n Hillsborough NC

We accept your price quote to install br ck columns for hanging a new sign at Coachwood Apartments n Hillsborough with same specs and used elsewhere on our signage for the price of $500 00 Please keep us posted on progress

United Management Inc

As Agent for Coachwood Apartments

Стр[illegible] ница.

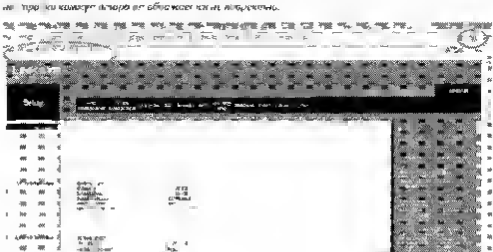
Для первоначальной настройки коммутатора SWR224G4 необходимо:

Подключить к порту коммутатора G4

На компьютере с которого осуществляется настройка необходимо назначить IP адрес из сети 192.168.123.0/24 (например 192.168.123.100).

Запустить браузер. Коммутатор поддерживает браузер IE версии 8+, мышь и K. Для обхода этой проблемы необходимо установить дополнительный плагин «IE-TAB» для браузера Google Chrome

При попытках входа на страницу коммутатора без предустановленного плагина, отличного от продукции коммутатор выдаст ошибку как на скриншоте.

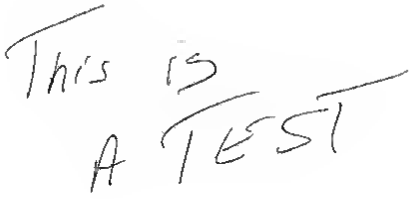


(например, http://192.168.123.254) — TAB. Для входа для этого необходимо нажать на него.

В браузере вводим адрес коммутатора (http://192.168.123.254)

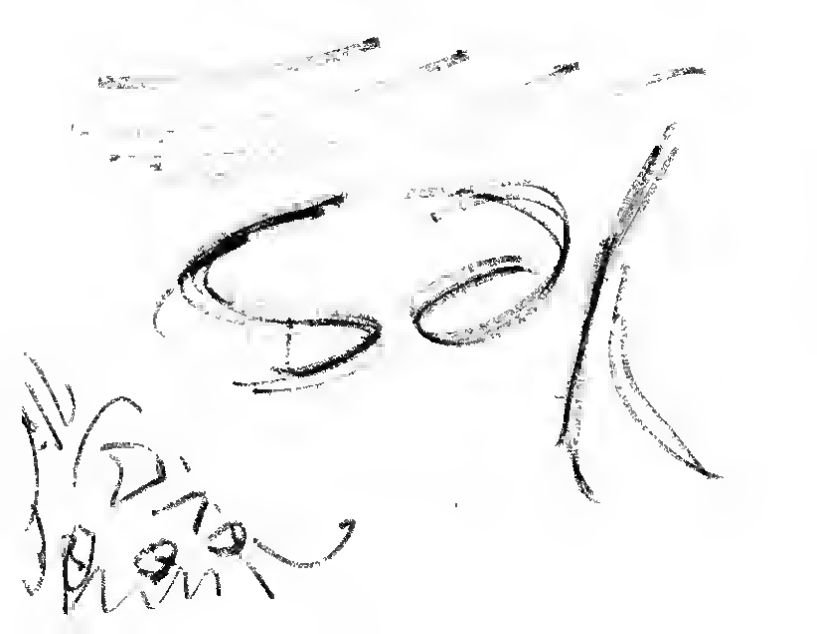
login: admin

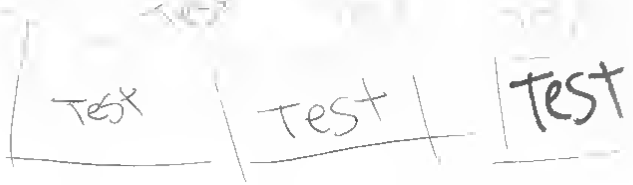
Password: admin123


This is
A TEST

Test

Fax




Test
Test
Test

Vocabulary

The street – la calle

The corner – la esquina

The city – la ciudad

The country – el país

Above/on – arriba, encima sobre

Below/under – abajo, debajo de

Behind – atras, detras

In front of – delante de

Between – entre

Facing – en frente de

Next to – junto a

Far – lejos

Near – cercano a

At the home of – en la casa de

There – allí

Here – aca aqui

Outside – afuera

Inside – adentro

Straight ahead – derecho siga derecho

The next one – el proximo, el siguiente

To the right – a la derecho

To the left – a la izquierda

North – el norte

South – el sur

East – el este

West – el oeste

Southwest- el sudoeste

Northeast – nordeste

Office of – las oficinas de

Internet Café – el café (internet)

Cathedral – la catedral

Newspaper – el periodico

Stand ... - el quiosco de

Factory – la fabrica

Hospital – el hospital

Emergency room – la sala de emergencias

Parking lot – el estacionamiento

Embassies- la embajada

Port – el Puerto

Aquarium – la acuario

Avenue – la avenida

Corner – la esquina

Pedestrian zone – la zona peatonal

Sidewalk – la acera

To get off of – bajarse de

To get up/ to get on – subirse a

To stop – parar

Traffic light – el semáforo

Road – la carretera

Park / green belt – la zona verde

Cardiac On-Call Schedule
April 2012

OC = On-Call and BU = Back Up

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10 07:30 am - 09:30 am OC - C. Trinh Binh	11 07:30 am - 09:30 am OC - G. Conjeveeram	12	13 07:30 am - 09:30 am OC - C. Trinh Binh BU - G. Conjeveeram	14
15	16	17	18	19 07:30 am - 09:30 am OC - G. Conjeveeram	20 07:30 am - 09:30 am OC - G. Conjeveeram 12:30 pm - 01:30 pm OC - C. Trinh Binh	21 07:30 am - 11:30 am OC - C. Trinh Binh 12:30 pm - 01:30 pm OC - G. Conjeveeram
22	23	24	25	26 07:30 am - 09:30 am OC - C. Trinh Binh	27	28
29	30	1 11:30 am - 12:30 pm OC - C. Trinh Binh	2	3	4	5

DUMMY FAX DOCUMENT

NO CONTENT HERE

Eric,

get started today!

1) **Call 844.560.8211** to add qualifying High Speed Internet from AT&T featuring **a 2-year price guarantee** and a **Wi-Fi Gateway** with monthly equipment fee included. Plus, get a **$50 Reward Card** when you order online.

2) Enjoy our convenient Self Installation Kit that includes all the equipment, connections and instructions you need to easily install High Speed Internet on your terms

3) AT&T leads all other major Internet service providers in customer satisfaction.
[illegible] Internet Service (ISP) Providers.

call 844.560.8211
click att.com/shop0555
visit your local AT&T store

Access to the entire national AT&T Wi-Fi Hot Spot network included

BRING THIS IMAGE TO LIFE
[illegible]

Geographic and service restrictions apply to AT&T U-verse services. Call or go to att.com/uverse to see if you qualify.

[illegible] **Offer ends 7-11-18.** [illegible]

All offers: Offers may not be combined with other offers [illegible]

©2018 AT&T Intellectual Property. All rights reserved. AT&T and Globe logo are registered trademarks of AT&T Intellectual Property. All other marks are the property of their respective owners.

Offer Code: [illegible]
[illegible]

Remember me next time
Emergency Access?

Log In

Factoring

Joe Tex Inc WILL pay factoring companies. However any and every invoice and/or remittance copy MUST be clearly marked to whom and what address to make checks payable.

Joe Tex Inc will NOT make a double payment.

Carriers are fully responsible for payment made to them. Payments that need to be forwarded to a factoring company are solely the trucking company's responsibility. However, if invoice/remittance is clearly marked, payment will be sent to the party indicated.

No statements sent from factoring companies stating that payments are to be sent to factoring companies will be signed. If invoices with or without remittance copies are sent that are not clearly marked to whom the payee should be, Joe Tex Inc does not guarantee that they will be sent to the factoring company.

Joe Tex Inc will not be held responsible for any payment that is mailed to the wrong address. It is YOUR responsibility to notify us of your receivables procedure.

Thank you for your cooperation

Angie Dunavent
CFO

Printed Name: _____ Company Name: _____

Authorized Carrier Signature: _____ Date: _____

Fax Confirmation

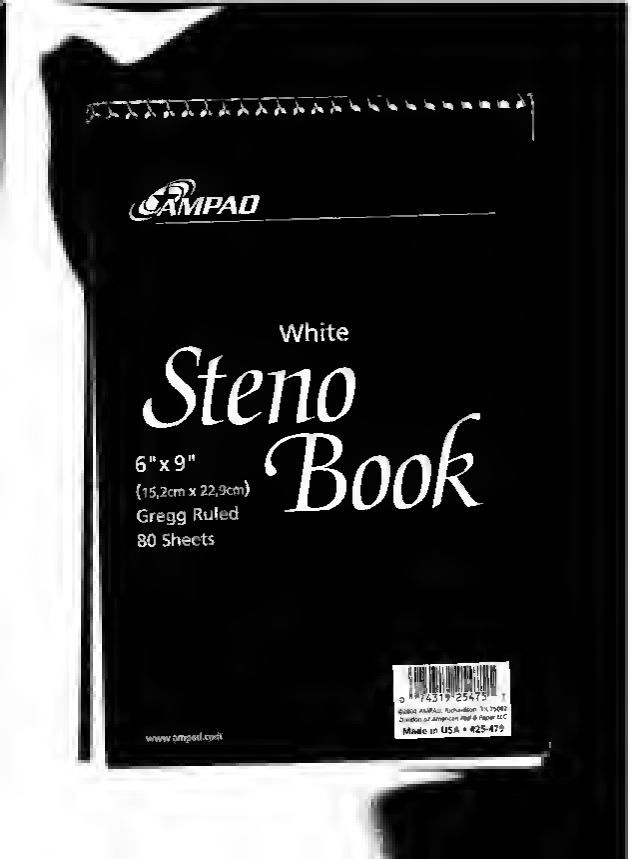
Model Number: KODAK ESP Office 2150 Series

Fax Number:

Date/Time: 4/16/2014 11:43 AM

Fax Confirmation

Date	Start Fax	Duration	Fax Type	To/From	Pages	Result
4/16/2014	11:43 AM	:20	Sent	17854783212	0	Error


AMPAD
White
Steno
Book
6" x 9"
(15,2cm x 22,9cm)
Gregg Ruled
80 Sheets
Made in USA • #25-479
www.ampad.com

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt Payee and Payee Exemptions* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account[1]
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor[2]
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee[1]
b. So-called trust account that is not a legal or valid trust under state law	The actual owner[1]
5. Sole proprietorship or single-owner LLC	The owner[3]
For this type of account:	**Give name and EIN of:**
6. Sole proprietorship or single-owner LLC	The owner[3]
7. A valid trust, estate, or pension trust	Legal entity[4]
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

[2] Circle the minor's name and furnish the minor's SSN.

[3] You must show your individual name and you may also enter your business or DBA name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

[4] List first and circle the name of the legal trust, estate, or pension trust. Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title. Also see *Special rules regarding withholding on page 1*

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; cancellation of debt; or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply

CLFPW3201- FYP

Information Classification: General

1. [illegible]

FAX TEST - BTI

1/8/13 2:40PM ECM #8 { 4000 8V 7T }

TESTING,

TESTING,

TESTING,

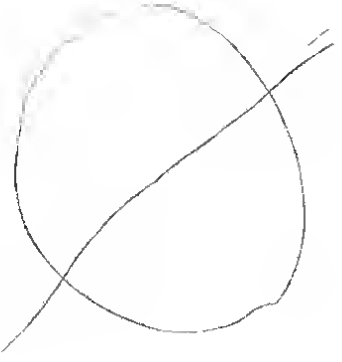
TESTING

4000 ms VOL = 7) 2X FAIL TO FAN TRY

9:16 FAN 1 8ms Vol 8

TRY 3RD X w/ CUT F1 OFF = OK
4TH X " " & VOL = 8?

F1 & 2 color PM - set voice vol back to 7



Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Brother MFC-440CN USB Printer on USER-PC.

The information below describes your printer driver and port settings

```
Submitted Time:  6:10 11 PM 5/14/2010
Computer name:   USER-PC
Printer name:    Brother MFC-440CN USB Printer
Printer model:   Brother MFC-440CN USB Printer
Color support:   Yes
Port name(s):    192.168.2.4_1
Data format:     RAW
Location:
Comment:
Driver name:     brio06a.dll
Data file:       brmfc440c.ppd
Config file:     brio06a.dll
Help file:       brio06a.chm
Driver version:  5.10
Environment:     Windows NT x86
Default datatype: RAW

Additional files used by this driver:
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brmfc440c.inf
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06a.dll (3.1.0.0)
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06a.dat
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brwmn06a.ini
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brcjkmon.exe          (3.5)
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brcjkmon.chm
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06aa.bcm
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06ah.bcm
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06ac.bcm
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06af.bcm
  C:\Windows\system32\spool\DRIVERS\w32x86\3\brio06ag.bcm

This is the end of the printer test page
```

TEST

7122

SUPERIOR SPRAY. SERIOUS RESULTS.

OPTIMIZE
PERFORMANCE

Let us assist with nozzle selection, determination of injector placement in the vessel and spray effectors to ensure optimal performance based on your exact operating conditions.

VALIDATE
DESIGN

Prior to fabrication, we can use Computational Fluid Dynamics (CFD) to validate nozzle spray performance. We can also use failure analysis modeling to verify the injector design will withstand process conditions such as chemical corrosion, heat transfer, vortex shedding and more.

BUILD
TO ORDER

Whether you need to dual gas atomize solids or overhead lance or inject chemicals or torch to ensure a gas stream, we can meet your needs. Injector types include hydraulic gas atomizing and steam versions equipped with a wide range of nozzles.

Spraying Systems Co.
Experts in Spray Technology

TAP INTO
LOCAL SPRAY EXPERTISE

TALK WITH YOUR LOCAL SPRAY EXPERT TO FIND OUT HOW WE CAN HELP

Companies like Technip, Mustang Engineering, Sasol, Shell and many others rely on us to manufacture IR31 | IR31 3 and U-Swing safe-containment injection and product radiographic, hydrostatic, ferrite tests and more. Let us do the same for you. Our local experts and Spray Technology Centers are right where you need them – in your area.

For unmatched service and support, visit spray.com/loc.eloexpert or call 1.800.95.SPRAY.

Select 67 at www.HydrocarbonProcessing.com/IG

[illegible] > [illegible]

Testing Your HP Fax Machine with the HP Fax Test Service

Support details

Introduction

This document will assist you in testing your HP Fax machine, using the HP Fax Test Service.

Print this document for easy reference by clicking the printable [illegible] link in the upper right corner of this page.

Test your fax machine

To test the capability of your fax machine, follow the directions below.

NOTE: Be sure that your phone number is not caller ID blocked by your telephone company prior to attempting to send and receive a fax. [illegible] the toll free number will unblock the Caller ID blocking feature [illegible] phone company services can prevent you from receiving a fax, including voice mail, call blocking, or call privacy services.

NOTE: Whenever troubleshooting a fax issue it is good practice to set the Automatic Reports option to Every Error before attempting a test fax. This way, even if the test fax fails, an error code will be generated that will guide you in future troubleshooting. This option is available in different places on different products, consult the product User's Guide for specific steps.

1. Send a one page black and white test fax to 1-888-HPFaxme (1-888-473-2963).
2. When your fax is received by the HP Test Fax machine, we will generate a return fax to you within five minutes confirming that we received your fax. This verifies that you can both send and receive a fax with your fax machine.

If you do not receive a return fax within 5-7 minutes, there may be a problem with the setup of your fax machine. Consult the user manual that came with the product for proper setup and

Test. Attention: Justin

Call me back if you get this.

Justin
707-575-8074

Marybeth

Yukon
Education
Éducation

PDF Test File

Congratulations, your computer is equipped with a PDF (Portable Document Format) reader! You should be able to view any of the PDF documents and forms available on our site. PDF forms are indicated by these icons or

Yukon Department of Education
Box 2703
Whitehorse Yukon
Canada
Y1A 2C6

Please visit our website at: http://www.education.gov.yk.ca/

Test EB

GOEBEL FIXTURE COMPANY

a supplier of specialties

Proposal

Date: 02/12/2016
Page: Page 1 of 1

528 Dale Street
Hutchinson, MN 55350

13600 County Road 62
Minnetonka, MN 55345

Phone: (320) 587 2112
Fax (320) 587 2378
www.gf.com

Submitted To:

Saks Fifth Avenue
Saks Fifth Avenue
Chicago Area

Attn:

Project:

Johnson Design Group
1000 N Halsted Suite 204
Chicago IL 60642

Attn:

Proposal # 303774 **Phase:** Option 1 Lighted Mirrors wi **Valid Until:** 02/12/2016 **Terms:** Net 30

Area	Qty		Description	Unit Price	Extended
Casework					
	16.00	Each	Skymark 320006 Coat Hook	$13.58	$217.20
	16.00	Each	Hanger - budget	$51.75	$828.00
	16.00	Each	Curtain Rod - budget	$82.50	$1,320.00
	2.00	Each	Lighted Triple Mirrors	$2,175.00	$4,350.00
	16.00	Each	Lighted Flat Mirrors	$793.75	$12,700.00
	1.00	Each	Skymark partitions	$21,252.30	$21,252.30
Misc					
	1.00	Each	Delivery	$1,257.00	$1,257.00
	1.00	Each	Installation	$25,220.64	$25,220.64
	1.00	Each	Tax	$2,148.62	$2,148.62
				Total:	**$69,293.76**

Phase Notes/Instructions:

Qualifications: Saks fifth avenue with lighted Skymark mirrors

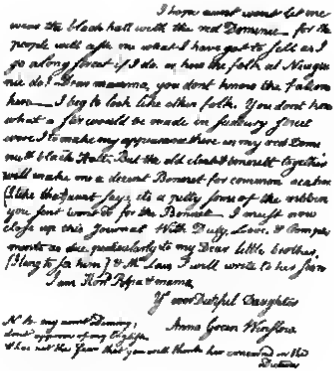
1.) Pricing is based on typical Skymark fitting room components per the quote received with this request for quote
2.) All plastic laminate partitions are figured as 2 sided Pionite Ice White.
3.) Hangers and curtain rods are budget pricing only and subject to change upon receipt of specifications.
4.) Installation is figured to be done in the Chicago area.
5.) This proposal includes lighted Skymark mirrors.
6.) Additional cost to add paint grade wood doors with door hardware: Add $11,246.14. This includes the door and installation

Respectfully Submitted: Brad Dobberstein, Estimator

Client Signature _____

Date: _____

Proposal in US Dollars (USD)



I hope aunt wont let me wear the black hatt with the red Dominee—for the people will ask me what I have got to sell as I go along street if I do, or how the folk at Newguinie do? Dear mamma, you dont know the fation here—I beg to look like other folk. You dont know what a stir would be made in sudbury street were I to make my appearance there in my red Dominee & black Hatt. But the old cloak & bonnett together will make me a decent Bonnett for common ocation (I like that) aunt says, its a pity some of the ribbin you sent wont do for the Bonnet.—I must now close up this Journal. With Duty, Love, & Compliments as due, perticularly to my Dear little brother, (I long to see him) & Mrs Law, I will write to her soon.

I am Hond Papa & mama,

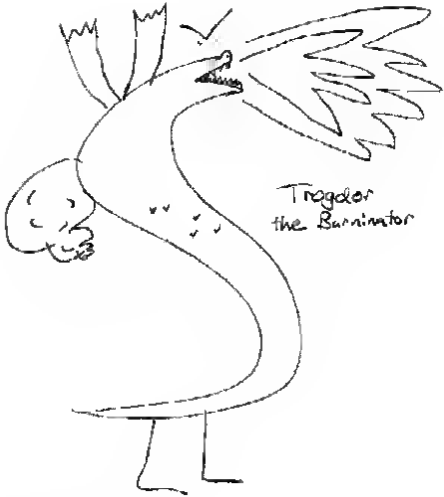
Yr ever Dutiful Daughter

Anna Green Winslow.

N.B. my aunt Deming, dont approve of my English, & has not the fear that you will think her concerned in the Diction.

1 2 3 4

1 2 3 4 5 6 7



1-503-200-1300
1-888-877-1655

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100.00 GAS
115 00 CAPITAL
46 07 [illegible]
389.07

2.00.71 50/463

PRI
FAX TEST
DLI
PRI
PRI

test

French II Final Exam Study Guide
Mme Brock 2017

Rules for conjugating the *Dr. & Mrs. Vandertrampp* Verbs:

1. Conjugate the correct form of être to agree with the subject.
2. Add the past participle
3. **Make the past participle agree with the subject:**
    - a. **Add nothing if masc. singular**
    - b. **Add –e if feminine**
    - c. **Add –s if masc. plural**
    - d. **Add –es if feminine plural**
4. If negative, the ne...pas surrounds the conjugation of être, not the past participle

Imparfait Endings	Imparfait Formation	Imparfait Usage
ais ais ait ions iez aient	Imperfect stem + Imperfect endings	

Imparfait

Parler	Finir	Vendre
Nous form of Present	Nous form of Present	Nous form of Present
Nous parlons	Nous finissons	Nous vendons
Imparfait Stem parl	Imparfait Stem finiss	Imparfait Stem vend
Je parlais	Je finissais	Je vendais
Tu parlais	Tu finissais	Tu vendais
Il/Elle/On parlait	Il/Elle/On finissait	Il/Elle/On vendait
Nous parlions	Nous finissions	Nous vend ons
Vous parliez	Vous finissiez	Vous vend ez
Ils/Elles parlaient	Ils/Elles finissaient	Ils/Elles vendaient

Imparfait

Être

(Être is the only verb in French that has an irregular stem in imparfait)

Je étais
Tu étais
Il/Elle était
Nous étions
Vous étiez
Ils/Elles étaient

Passé Composé ou Imparfait

1. Je dormais (dormir) quand le téléphone sonnais (sonner)
2. Quand j' étais (être) 5 ans, j' avais (avoir) trois chats.
3. Il partait (partir) à minuit.
4. Ce matin, je me levais (lever) à six heures.
5. Il faisait (faire) beau hier.

[illegible]

[illegible]	Sunny	[illegible]	Pitch

[illegible]	Day	Mar 2		
	Fee	$0.00	$0.00	$0.00

Sub-Total: $0.00
Tax ($10.00%) = $0.00 + Fees ($25.00) = Total: $25.00

Note: Rules apply. Please read.

[illegible]

[illegible]	Sunny	[illegible]	Pitch

[illegible]	Day	Mar 20	Mar 21	Mar 22
	Fee	$300.00	$300.00	$300.00

Sub-Total: $1,192.00
Tax ($10.00%) = $119.20 + Fees ($25.00) = Total: $1,341.20

Note: Rules apply. Please read.

Special Request Brief

[illegible]

Test

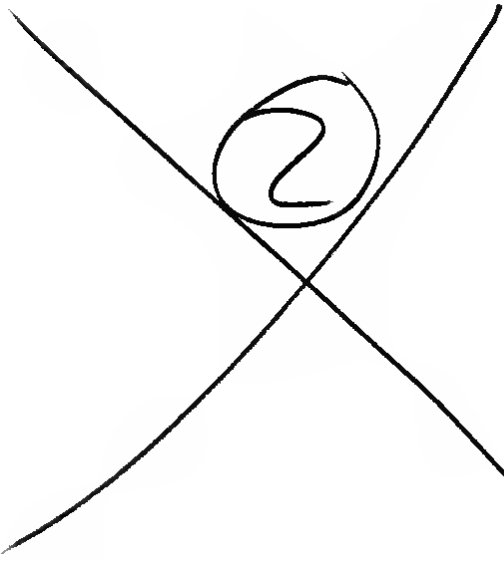
1

2

3

9

8682



Test

FAX

TRANSMISSION VERIFICATION REPORT

TIME 02/08/2007 05:38
NAME CONNECTTO COMM
FAX 8135484545
SER.# BROMFF953903

DATE,TIME	02/08 06:08
FAX NO./NAME	14339211335
DURATION	00:00:00
PAGE(S)	00
RESULT	BUSY
MODE	STANDARD

BUSY BUSY/NO RESPONSE

TEST

CURVES

TEST

Test Page

LER@WHI

CSF@WHI

BTM@WHI

LRH@WHI

BLT@WHI

Kevin

STATE OF COLORADO

John W. Hickenlooper, Governor
Christopher E. Urbina, MD, MPH
Executive Director and Chief Medical Officer

Dedicated to protecting and improving the health and environment of the people of Colorado

4300 Cherry Creek Dr. S.
Denver Colorado 80246-1530
Phone (303) 692-2000
Located in Glendale, Colorado
http://www.colorado.gov/cdphe

Laboratory Services Division
8100 Lowry Blvd.
Denver, Colorado 80230-6928
(303) 692-3090

Colorado Department of Public Health and Environment

Please read this document. Failure to submit all completed documents as described below will delay the renewal of your license.

Subject: Implementation of C.R.S., 24-76.5-101, et. seq., "Restrictions on Public Benefits" (HB 1023)

To Whom It May Concern:

You will find an affidavit included with your renewal registration/application. All licenses, certifications, and registrations issued to individual owners or sole proprietors by the Colorado Department of Public Health and Environment must be accompanied by verification of citizenship. This requirement does not apply to you if you are not an individual owner or sole proprietor. Verification includes completion of the enclosed affidavit and providing a **notarized copy of an approved identification.** Approved identification includes:

- A valid Colorado driver's license or a Colorado identification card,
- A United States military card or a military dependent's identification card,
- A United States Coast Guard Merchant Mariner card,
- A Native American Tribal Document,

You may access a notary in your area by conducting a search through directory assistance for "public notaries."

C.R.S., 24-76.5-101 "Restrictions on Public Benefits" became effective August 1, 2006, and requires "each agency or political subdivision of the state" to verify the lawful presence in the United States of every applicant for public benefits. The law requires the verification of citizenship in order for persons eighteen years of age or older to receive certain benefits or obtain a license or certification from the department. If the recipient of the benefit is under eighteen years of age, the law does not apply.

If you need assistance in complying with this law or if there is additional information you feel we need to be aware of, please do not hesitate to contact me at 303-692-3645.

Sincerely,

Division of Environmental Health & Sustainability

Test

TEST

FAX

FAX
TRANSMISSION

To:

From: FV

Subject: RE: Test

Message: Test

Company Name
Address
Tel Fax
Email Website

This fax was sent by GFI FAXmaker for Exchange

Test

Mp Q

TEST - 11 - Ans

FAX
TRANSMISSION

Message: TEST F

FAX

Date

Pages

Subject

To:
Organization:
Fax Number:
Phone Number:

From:
Organization:
Fax Number:
Phone Number:
Email:

Comments:

[redacted]

Electronic Mail Fax Systems
FaxFinder

If you received this fax in error, or would like to opt-out, please call _____ Fax _____
or email _____

TEST

TEST

TEST

Test93

HAPPY!!!

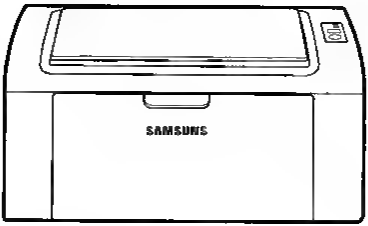
Test 2

1191

BS

Samsung Monochrome Laser Printer

ML-21[illegible] Series



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Easy Management

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PERSONAL CARE	YOUR BRAND	PRICE	AVON	SAVE
Deodorant				
Shampoo/Conditioner				
Hair Styler/Treatments				
Body Lotion				
Hand Cream				
Shower Gel				
Bubble Bath				

SKIN CARE				
Facial Cleanser				
Facial Treatment				
Treatments				

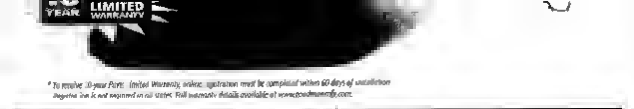
MAKEUP				
Lipstick				
Nail Care				
Mascara				
Powders				
Pencils/Liners				
Foundation				

FRAGRANCE				
Women				
Men			TOTAL SAVINGS	

CUSTOMER'S NAME _____ PHONE _____

Test

FORGET CAKE
3-Layer NEED NEW SHOES!
DSW REWARDS



* To receive 10-year Forti- limited Warranty, online registration must be completed within 60 days of installation. Registration is not required to file claims. Full warranty details available at www.goodmanmfg.com.

TRANSMISSION VERIFICATION REPORT

TIME : 11/02/2017 16 02
NAME :
FAX :
TEL :
SER # : [redacted]

DATE TIME	11/02 16 02
FAX NO /NAME	18574668816
DURATION	00 00 27
PAGE(S)	01
RESULT	NG
MODE	STANDARD

NG: POOR LINE CONDITION / OUT OF MEMORY

Dis a test yo

RECEIVED 09/16/2015 04:17PM

Phone Power

test facsimile

To Broadvoice

Subject: test fax
total pages including cover: 01

Hello

This is a test fax sent for the purposes of isolating issues with faxing features. Please report any errors that may appear.

Thank you.

MFD ECOPW Test List

Here is a quick list of the steps to test the ECOPW on the MFD:

1) Power on the Exponent MFD and wait for the Login screen to appear. Enter the login credentials and then navigate to the Test Page.
2) Press the ECOPW button on the MFD touchscreen. Enter the ECOPW Power NT Server Login ID and password.
3) Run a Scan Test. Enter a name for the Test Page and then save the test page.
4) Run a scan test and verify that the Test Page was saved to the Exponent Server.
5) Use the Exponent Web Portal to transfer the Test Page from the Exponent Server to the MFD.
6) Select the test from the list. Enter the fax number 1-855-555-1212 and then view the Fax Transmission test setting. Wait to confirm that the test fax was successfully sent. The MFD will display a success message at the bottom of the screen. Confirm that the correct fax number was dialed, then send the test fax to a fax machine operated by a human.
7) Dial the fax number from a touch-tone phone. When the fax signal starts to sound, if they can hear it, proceed to step 8. Otherwise, if you do not hear the signal, then the test fax was not received correctly. Review the test log and troubleshoot the test failure.

Frank's Pizza Fax Order Form

Menu (12-27-24)

For pre-delivery, frank delivery time, please place order in advance
Limited delivery area | $15 minimum order required for delivery

Name: _____

Phone No: _____

Address: _____

_____

_____

Date Required: _____

Time Required: _____

Circle one: Delivery or Pick up?

Size and prices (some specials may not be available on delivery)

Pizzas — Med 12" (8 slices) | Large 14" (10 slices)

Supreme (Pepperoni, Sausage, Green Peppers, Onions, Mushrooms, Black Olives) | Personal Pepperoni, Margherita

Meat Lovers (Pepperoni, Sausage, Bacon, Ham) | Veggie (Mushrooms, Onions, Green Peppers, Black Olives, Tomatoes)

Specialty — Hawaiian (Ham, Pineapple) | Buffalo Chicken (Grilled Chicken, Buffalo Sauce, Ranch Drizzle)

BBQ Chicken (Grilled Chicken, BBQ Sauce, Red Onions, Cilantro) | Margherita (Fresh Mozzarella, Basil, Tomatoes, Olive Oil)

Specialty Calzones — Classic Calzone (Ricotta, Mozzarella, Pepperoni) | Buffalo Chicken Calzone (Grilled Chicken, Buffalo Sauce, Mozzarella, Ranch)

Spinach & Feta Calzone (Spinach, Feta, Mozzarella, Garlic) | Veggie Calzone (Mushrooms, Onions, Green Peppers, Black Olives, Mozzarella)

Entrees — Beef Stroganoff with Garlic Mashed Potatoes

Parmesan crusted Pork Medallions with Mashed Potatoes

Appetizers & Salads — Spicy Wings (choice of Buffalo, BBQ, or Garlic Parmesan) | Garlic Knots (Baked with Garlic Butter and Parsley)

Caesar Salad (Romaine, Parmesan, Croutons, Caesar Dressing) | Garden Salad (Mixed Greens, Tomatoes, Cucumbers, Choice of Dressing)

Drinks — Coke | Diet Coke | Sprite | Water

Orange Juice | Cranberry Juice | Iced Tea | Lemonade

Desserts — Chocolate Lava Cake (Warm Chocolate Cake with Molten Center) | Cheesecake (Classic New York Style with Graham Cracker Crust)

Tiramisu (Espresso-Soaked Ladyfingers, Mascarpone Cream, Cocoa Powder) | Apple Crisp (Baked Apples with Cinnamon Streusel Topping)

Extras — Extra Cheese | Extra Pepperoni | Extra Sausage | Extra Mushrooms | Extra Onions | Extra Green Peppers | Extra Black Olives | Extra Pineapple | Extra Ham | Extra Bacon | Extra Buffalo Sauce | Extra Ranch Dressing | Extra Caesar Dressing | Extra Garlic Butter | Extra Parmesan Cheese | Extra Red Pepper Flakes

Qty	Size (eg, M, L, XL, Type Req, etc)	Description	Special Instructions

Frank's Pizza | 4 7 Travis St | Houston, TX 77002 | Ph: 713-225-3836 | Fax: 713-225-1737 | frankspizza.com

Adobe Acrobat PDF Files

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Adobe PDF is an ideal format for electronic document distribution as it overcomes the problems commonly encountered with electronic file sharing.

- ***Anyone, anywhere*** can open a PDF file. All you need is the free Adobe Acrobat Reader. Recipients of other file formats sometimes can't open files because they don't have the applications used to create the documents.
- PDF files ***always print correctly*** on any printing device.
- PDF files always display ***exactly*** as created, regardless of fonts, software and operating systems. Fonts and graphics are not lost due to platform, software and version incompatibilities.
- The free Acrobat Reader is easy to download and can be freely distributed by anyone.
- Compact PDF files are smaller than their source files and download a page at a time for fast display on the Web.

Contact Information

Please return your completed, signed and dated Consumer Identification and Certification Form and a copy of one form of identification (Driver's License, ID Card, Passport or other government issued identification) to Early Warning by mail, fax or uploaded to our Secure Transfer Portal.

Address	FAX
Early Warning 16552 N. 90th Street Scottsdale, AZ 85260	480-956-5850

To communicate electronically with us, via the Transfer Portal, go to https://consumerservices.earlywarning.com. When prompted for the Early Warning email address enter consumerservices@earlywarning.com. Follow the instructions on the screen to create your User ID and password, and to upload the documents to be transmitted to Early Warning. If you need technical assistance with the Transfer Portal please call 877-658-4487.

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This is a Test
fax by TLC!

dBekUkfskfjml

Phone:
Fax

Message :

This is a test

From:	To:
R	test

Date 12/4/2012 Page(s): 1

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To:	
Company	
Tel	
Fax	1 866-830-1239
From	AvantFAX Admin
Company	
Tel	
Fax	
Regarding	
Date	09 / 12 2014 11:19

Remaining pages: 0

Comments:

test fax from Glenn

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Iowa Speedway

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Belle Plaine
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SSH CLS 888-1

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IN GOD
WE
TRUST

TEST

BARWELL PRINTING INC • (276) 634-3772

Validation

INVENTORY VALIDATION SHEET

Dept: 8 **E- GAMES**

Store Location: 06 Store Location Number: 38

Inventory Agent/Counter: JOSE FIGUEROA Associate Number: 22549

Operations Manager: ALEX HERNANDEZ Date & Time: 4/5/2010 0 00

		DOLLARS	UNITS/PCS
TOTAL AMOUNT OF INVENTORY ON CUSTOMER REPORT	A)	$126,946.99	999
TOTAL AMOUNT OF INVENTORY TESTED	B)	$121,919.02	637
PERCENTAGE TESTED (B DIVIDED BY A)	B%	96.17%	70.86%
ADDITIONAL INVENTORY FOUND NOT ON INVENTORY REPORT (POSITIVE DISCREPANCY)	C)	$6,202.00	204
INVENTORY NOT FOUND (NEGATIVE DISCREPANCY)	D)	$11,083.00	(399)
TOTAL DISCREPANCY (C PLUS D)	E)	$4,822.00	(195)
POSITIVE VARIANCE (C DIVIDED BY B)	F)	5.17%	32.03%
NEGATIVE VARIANCE (D DIVIDED BY B)	G)	-9.14%	-62.64%
TOTAL INVENTORY REPORT ACCURACY (F MINUS G, DIVIDED BY B)	H)	103.98%	130.61%

General Manager _____ Date: 4/5/10

Note. CLEARLY EXPLAIN ALL VARIANCES ON THE INVENTORY REPORTS AND CORRECTIVE ACTIONS TAKEN TO ELIMINATE/REDUCE THEIR RECURRENCE

gfdgf

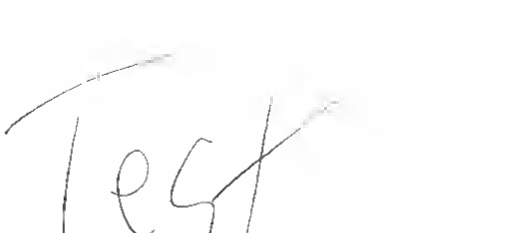
testtesttest

WILBER

Fax Cover Sheet

To:		Fax:	19333301239
From:	Wilber and Associates	Date:	[illegible]
Subject		Pages:	1

TESTTESTTEST


Test
TBQIWA054

TEST fax

****
*** ERROR IN REPORT ***
****

INCOMPLETE TRANSMISSION

TX/RX NO.	0009
DESTINATION NUMBER	2146 53959
DESTINATION ID	
ST. TIME	12/30 12:06
COMMUNICATION TIME	01'15
PAGES SENT	1
RESULT	NG

TESTING TESTING TESTING

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TESTING TESTING TESTING

TESTING TESTING TESTING

TESTING TESTING TESTING

I COULDN'T THINK OF ANYTHING FUNNY TO SAY, SO I JUST DREW A F*!&#G DUCK!

Phone (919) 561-4116
Fax

Fax

To: Luke Higgs	From: Luke Higgs
Fax: 18888774655	Pages: 1
Re:	Date: October 15, 2013

102 Pinaring PL APT 2D Cary NC 27513

Are you still receiving your faxes on paper? Internet faxing is so much better. Try it now for free www.send2fax.com/free

4sOvwqtd efzTestTextFiletxt txt

test text file

Hey there!

I hope you're having a good day. I'm just here to test my fax machine because for some reason I think this ancient technology is pretty useful still. Anyway, take care!

-Anon

test text file

Fax

Date:	05-25-2018
Subject:	Testing!
To:	Supplier Setup
Phone:	
Fax:	Blah!!!!!!
From:	Yahoo!
Phone:	123456
Fax.	
No. of pages:	1

Message:

Hello Supplier Setup Team-

FAX TEST

M2-12-East

LC

I WANT AN ADULT SWIM
VR CARDBOARD VIEWER

FAX THE COMPLETED FORM TO: 404-745-8222

NAME:

MAILING/SHIPPING ADDRESS:

EMAIL:

☐ By submitting this form, I confirm that I am age 18+ and otherwise meet the terms and conditions, below.

Purchase conditions. Offer open to legal residents of the 50 US and DC only. Void where prohibited. Limit one unit per household. Adult Swim reserves the right to withhold prizes if eligibility cannot be confirmed. Allow 4-6 weeks for delivery. Limited supplies available. Offer expires [illegible]. Limit one unit per household. Void where prohibited. Limited supplies available. Offer expires [illegible]. Limit one unit per household.

Important Health And Safety Warning for Users of the Adult Swim VR App.

You Must Be 13 Years Of Age Or Older To Access And Use The Adult Swim Virtual Experience App. Some People May Experience Severe Eyestrain, Seizures, Epilepsy, Seizure Or Blackouts Triggered By Light Flashes Or Patterns. This May Occur While They Are Experiencing Virtual Reality Adverse Effects. This May Be More Common In Younger Users Than Older Users. You Should Consult A Doctor Before Using The App If You Have Ever Had Any Of These Seizures Or Epilepsy. Anyone Who Has Had A Seizure, Loss Of Awareness, Or Other Symptom Linked To An Epileptic Condition Should See A Doctor Before Using The App. You Should Also Consult A Doctor Before Using This VR App If You Are Pregnant, Elderly, Have Pre-existing Vision Abnormalities Or Other Disorders. Stop Use Immediately If You Experience Any Of The Following Symptoms While Using The App: Dizziness, Altered Vision, Eye Or Muscle Twitches, Loss Of Awareness, Disorientation, Any Involuntary Movement, Or Convulsions. Immediately Discontinue Use And Consult Your Physician Before Resuming Use.

Facsimile Transmittal Sheet

To: Test
Company
Fax 1-503-200-1300
Phone

From:
Fax
Phone
E mail garrett.craig@pmsionline.com

Notes:
Test fax

timely

pmsi

medical services and equipment

clinical

pharmacy

Number of pages including coversheet 01
Thursday, April 07, 2011 8:03:12 AM

NOTICE: THIS DOCUMENT MAY CONTAIN CONFIDENTIAL OR PROPRIETARY INFORMATION INCLUDING PATIENT HEALTH INFORMATION WHICH IS PROTECTED UNDER HIPAA AND OTHER STATE AND FEDERAL CONFIDENTIALITY LAWS. PLEASE DELIVER IMMEDIATELY ONLY TO THE INTENDED RECIPIENT. IF THIS TRANSMISSION WAS RECEIVED IN ERROR, PLEASE CONTACT THE SENDER IMMEDIATELY AND DO NOT DISTRIBUTE THE INFORMATION TO ANY OTHER PERSON.

TEST

SD

5

From: □□□□FX□□m□□

This is a PDF File Test Page

If you can read this, then you must have downloaded it and therefore will be able to download any plans in pdf file format

Of course the plans will take a little longer to download than this page because the plans contain more pages

This is a picture of a house that could do with a handyman.

Attention

Jessica

TEST
FAX
1 MB

FAX

ATTN. Mr Al Sigman

Fax Number 480-445-9366

Phone Number 480-699-7428

FROM Les Black

Fax Number 480-832-5377

Phone Number 480-832-5377

SUBJECT

Number of Pages 1

Date 5/13/2010

MESSAGE

Al

I'm up and running

Les

Test my fax 1

end

Test my fax 2

end

Test my fax 3

end

Prayer to St Joseph over 1900 years old

O St. Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place in you all my interests and desires O St. Joseph do assist me by your powerful intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ, Our Lord, so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers. O St. Joseph, I never weary contemplating you and Jesus asleep in your arms I dare not approach while He reposes near your heart Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath. St. Joseph, Patron of departing souls, pray for us Amen

Say for nine consecutive mornings for anything you may desire It has seldom been known to fail.

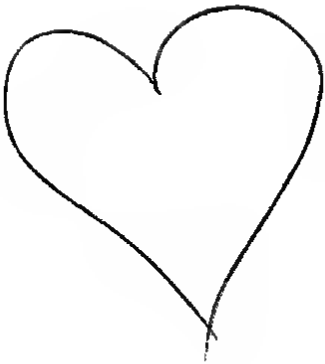
This prayer was found in the fiftieth year of Our Lord Jesus Christ. In 1500's it was sent by the Pope to Emperor Charles when he was going into battle.

Whoever reads this prayer or hears it or carries it, will never die a sudden death nor be drowned, nor will poison take effect on them They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle

Make this prayer known everywhere.

Imprimatur
Most Rev George W Ahr
Bishop of Trenton

Back to Et Cum Spiritu Tuo



you + hp

FaxBack System Test

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Other useful hp web sites

www.hp.com/register
Use this web address to register your HP product.

www.hp.com/support
Use this web address to obtain additional support for your product

www.hpshopping.com
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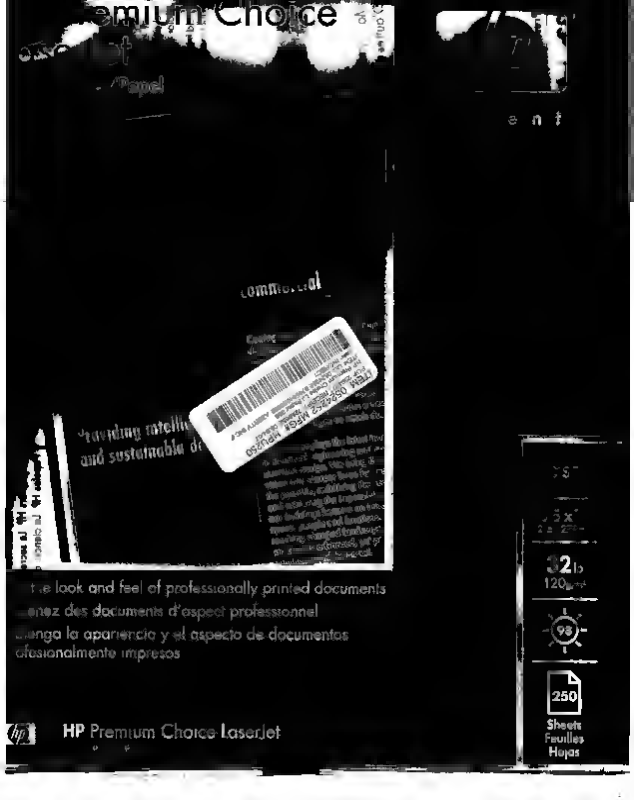
****
*** TX REPORT ***
****

TX IMAGE SET NOT TO DISPLAY

JOB NO.	3026
ST TIME	03/02 11:07
PGS.	6
SEND DOCUMENT NAME	
TX/RX INCOMPLETE	-----
TRANSACTION OK	-----
ERROR	7p18557130507


emium Choice
Papel
e n t
Commercial
"providing satelli
and sustainable d
32lb
120g/m²
98
250
Sheets
Feuilles
Hojas
the look and feel of professionally printed documents
enez des documents d'aspect professionnel
uenga la apariencia y el aspecto de documentos
ofesionalmente impresos
HP Premium Choice LaserJet

The undersigned hereby authorizes Anveo Inc. to act as the responsible organization for the following phone number to initiate transfer/porting to Anveo.com local carrier. **PLEASE USE ONE FORM PER PHONE NUMBER**

Account number with your current provider:

Your Anveo account number:

First Name and Last Name:
as listed in the invoice

Address as it appears on the account with the current provider:
as shown in the invoice

Authorized Contact Name (for busines phone numbers):

Authorized Tel#:

Phone Number to be ported: ____________________

PIN Code (if porting a cell phone number):

Please select "Country" "Rate plan"

Select rate plan for the phone number to be ported
[illegible]

Per Minute	Personal Unlimited	Office Unlimited	Toll Free
☐	☐	☐	☐

☐ I already have Anveo phone number and want it with the number ported
[illegible]

List any additional phone numbers to be ported from the same provider below
Note: The phone numbers must be appeared on the attached invoice

1 To initiate the porting process you must have:
- A signed copy of this porting authorization form
- The latest copy of the invoice from your current provider

2 The invoice (screenshot) must show:
- Your name
- Your address (if the address is a PO box, provide us your physical address also)
- Phone number(s) to be ported (you can add screenshots of the current provider's site showing all the numbers)
- Account number

3 Initiate porting from Anveo dashboard http://www.anveo.com/lnp.asp

Country		Geographic Fee (USD)	Toll-Free Fee (USD)	Approx time (business
UNITED STATES	☐	$15	$15	25
CANADA	☐	$15	$15	15
AUSTRIA	☐	$50	$50	25
BELGIUM	☐	$24	$24	20
BRAZIL	☐	$50	$50	30
CROATIA	☐	$20	[illegible]	30
CHILE	☐	$60		30
CZECH REPUBLIC	☐	$65		15
DENMARK	☐	$45	$45	30
DOMINICAN REPUBLIC	☐	$60		30
ESTONIA	☐	$29		20
GERMANY	☐	$101	$101	30
GREECE	☐	$29		20
HUNGARY	☐	$77	$77	15
ISRAEL	☐	$20		30
LITHUANIA	☐	$21		15
LUXEMBURG	☐	$77	$77	20
MEXICO	☐	$60		20
NETHERLANDS	☐	$60	$148	30
NEW ZEALAND	☐	$70	$45	30
NORWAY	☐	$45		15
POLAND	☐	$15		15
PUERTO RICO	☐	$38		25
ROMANIA	☐	$60		20
SLOVENIA	☐	$15	$13	15
SOUTH AFRICA	☐	$65		15
SPAIN	☐	$35	$35	[illegible]
SWEDEN	☐	$60	$225	15
SWITZERLAND	☐	$60		25
UNITED KINGDOM	☐	$29	$75	20

You can port your phone number in USA and Canada free of charge*

SPECIAL OFFER: **Port a phone number in US and Canada for FREE to Personal Unlimited or Office Unlimited rate plan with 12 month pre-payment for the phone number**	☐	FREE **	see above

* Terms and Conditions. Upon initiating porting process, your account will be charged a non-refundable porting fee according to the prices listed above. A porting process takes 3-8 weeks on average to complete, however in some cases it may take longer. You must maintain active service with your current provider until after the number is successfully ported to Anveo. The porting request may be declined/rejected by the losing carrier, your existing provider, Anveo or Anveo's carrier at any time during the porting process. You acknowledge and agree to hold harmless Anveo from and against any damages or liabilities of any kind related to the porting of a phone number. After the phone number is ported, your number will be charged the phone number setup fee and [illegible] subscription according to the Anveo Phone number rate plan selected above. During the porting process, our carrier might request to provide additional information and you agree to provide it in a timely manner, otherwise the porting request will be cancelled.

** Free Porting Specific Terms. When the FREE porting is complete the phone number will be pre-paid for 12 months and number will be charged a non-refundable $24 (12 x $2/month) for Personal Unlimited rate plan or $48 (12 x $4/month) for Office Unlimited rate plan. If the porting request was not complete (for example you canceled the request or you failed to provide information required to complete the porting in a timely manner), the regular $15 non-refundable porting fee will be charged.

AUTHORIZED SIGNATURE ____________________ **DATE** ____________

Please open this link http://www.anveo.com/lnp.asp *and attach the signed copy of this form and a copy of the latest invoice/bill statement from the current service provider for the phone number to be ported.*

Windows Printer Test Page

You have correctly installed your MS Publisher Color Printer on DC

PRINTER PROPERTIES

Submitted Time	6:48:01 AM
Date	3/10/2015
Computer Name	TFDOMAIN\Administrator
Computer Name	DC
Printer Name	\\http://10.1.4.250:631/ipp/ps
Printer Model	MS Publisher Color Printer
Color Support	Yes
Port Name(s)	http://10.1.4.250:631/ipp/ps/
Data Format	RAW
Print Processor	WinPrint
OS Environment	Windows x64

PRINT DRIVER PROPERTIES

Driver Name	MS Publisher Color Printer
Driver Type	Type 3 - User Mode
Driver Version	6.3.9600.17415

ADDITIONAL PRINT DRIVER FILES

C:\Windows\system32\spool\DRIVERS\x64\3\SCRIPT.NTF
C:\Windows\system32\spool\DRIVERS\x64\3\PSCRIPM.DL

Little Rapids Corporation

2273 Larsen Road
P.O. Box 19031
Green Bay, WI 54307-9031
Phone 920-496-3040

FAX COVER LETTER

To **Fax Toy**
Company
Fax 18553301239
Phone

From
Fax
Phone
E-mail mueller@littlerapids.com

NOTES Fax Test

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the day off the dog

(100)

Genevamarie lambert 26 th 2010

The Worends.

Germany attacked t weakend the Allied powers. Fresh American troops came in t helped push Germany back. nov. 11. 1918 Allied t German leaders Met t agreed upon an armistice (stop to) fiving

Costs of the war

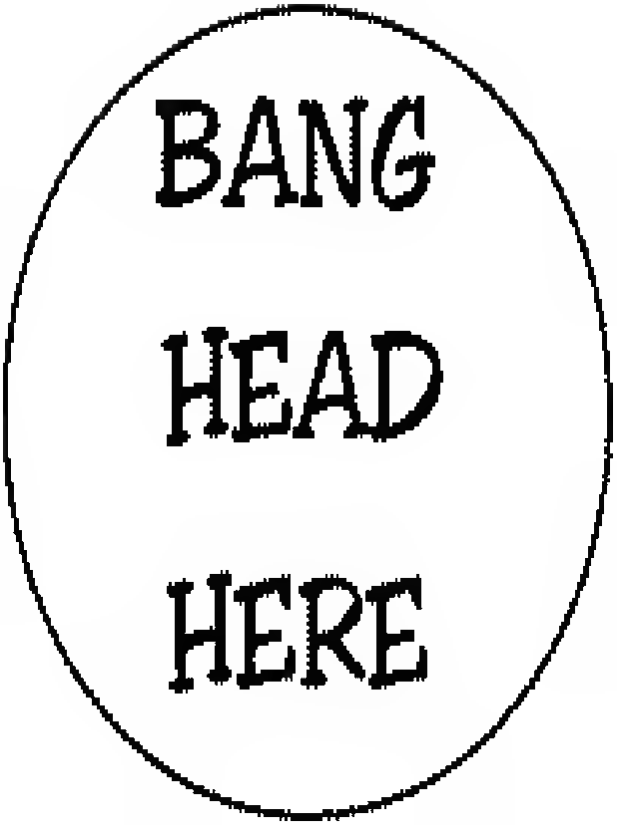
$337 billion

10 million Sodrics died

Alvin C. Yourk

He was 30. yrs. old when the military draft was issued. He did not believe in Fighting but still drafted. Oct. 8 1918 Yourk captured 132 aremeny Soldries.

Awarded the congressional medal of Honor for bravery.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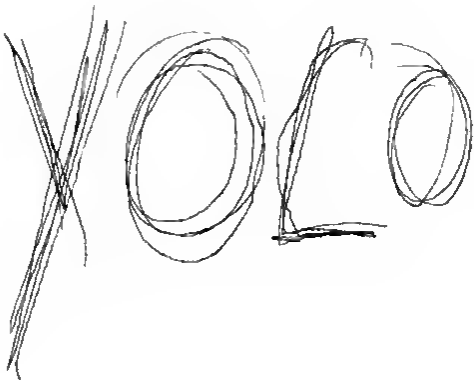
I bet it wont work.


YOLO

The charism of Administration

empowers a Christian to be an effective channel of God's wisdom by providing the planning and coordination needed to accomplish good things

"I think of myself as the Swiss army knife in God's pocket. You can almost always get the job done if you have one around."
Sherry Carp, administrator

Sometimes Christians think of administration as dry and boring and of administrators as impersonal bureaucrats more interested in shuffling papers than in ministering to people. The truth is that some of the most effective people-helpers in history were administrators. Although both St. Vincent de Paul and Florence Nightingale are famous for their works of mercy, neither of them spent the majority of their time personally ministering to others. What made them so effective? They both had phenomenal charisms of administration. They were organizational geniuses who cut through the chaos, lethargy and indifference around them like a hot knife through butter—they designed and carried out efficient programs which enabled the needs of large numbers of the poor and sick to be met.

The charism of administration is sometimes confused with either the charism of leadership or the charism of service. Leaders come up with and share the vision of what *could be* in a way that makes others want to be a part of it. Administrators make and execute the logistical plans that will make the vision *happen*. Leaders are usually *problem-discoverers*—they tend to look on the world about them with new eyes that see the unrecognized needs and then visualize new ways to meet those needs. Administrators specialize in *problem-solving*: in efficiently meeting the needs that are already recognized. Leaders call us to God's purposes and set our direction; administrators get us there.

"If your gift is administration, then use it for administration."
St. Paul, in his *Epistle to the Romans* 12:7

Christians with the charism of service are very sensitive to unmet needs or organizational gaps, but they are strongly motivated to meet the need *themselves*. In contrast, someone with the charism of administration finds it easy to delegate portions of the overall task to others and to coordinate the work of a number of people toward a single goal.

A friend of mine with a strong charism of administration describes herself this way: "I think of myself as the Swiss army knife in God's pocket. You can almost always get the job done if you have one around." (She, however, owes a debt of thanks to those among us who

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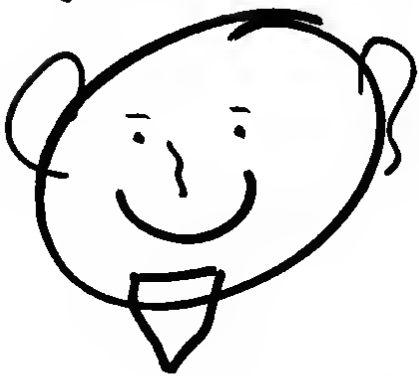

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Ticket 3 of 3

Room 2. Blissful suite 1 — Adults: 2 Children. 0

First Name	Ba	Last Name	Ba

Personal Room with Personal Feelings, Once you stay a this room you w Tips high Mother & more higher Though this room is only for Single person, we can allow couples in off seasons
+ Invited only Testing Testing Testing
Not Included Ice cream (gst/gst)

Room Details	Date	Mar 28	Mar 29
	Rate	$ 100.00	$ 100.00

Sub-Total $200.00
Tax (11.00%) $22.00 + **Food($1.00)** Total: $ 223.00 — **Note:** Rates Include Extra Person/Child Rates

Room 3 Mommy Room — Adults: 1 Children. 1

First Name	Ba	Last Name	Ba

This is mommy room with mommy flavor This room is silent calm & fac ng towards jungle. In morning time you will see People looking thr r Water Drain & going inside Rain leave r Yes In this room is based on Concept of Cuddle Whom never slept get Samsung Galaxy S7 or gift
[testcolon][fong]ch[end of][test][data][collection][end of][test][data][collection][end of][test][data][collection][end of][test][data][collection]Note This is mommy room, with mommy flavor This room is silent, calm & facing towards jungle. In morning time you will see People looking thr Water Drain & going inside Rain leave r Yes to this room is based on Concept of Cuddl G Whom never slept get Samsung Galaxy S7 or gift
[testcolon][fong]ch[collection][end of][test][data][collection][end of][test][data][collection][end of][test][data][collection][end of][test][data][collection]Note
+ Included: Many items, but first stay than w it is f
Not Included. Cards

Room Details	Date	Mar 28	Mar 29
	Rate	$ 100.00	$ 100.00

Sub-Total: $200.00
Tax (11.00%) $22.00 + **Food($1.00)**= Total: $ 223.00 — **Note** Rates Include Extra Person/Child Rates

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Flow Cytometry Report

Patient Information	Physician Information	Accession # **20557**
Name Kay Knepp **Age** 30 Sex. Male **DOB.** 02/05/1986 **Medical Record#** 34567854 **Encounter#** 1236987	**Ordering** Kay Knepp 15440 Laguna Canyon Rd, Suite 260, Irvine 92618	**Date Collected:** N/A **Date Received** 09/23/2016 **Date Reported.** 09/23/2016 07:40 AM

CC

Diagnosis: CONSISTENT WITH A B-CELL LYMPHOPROLIFERATIVE DISORDER (see comments)

COMMENTS

No immunophenotypic evidence of a lymphoproliferative disorder acute leukemia. Increase in blasts or plasma cell neoplasm is identified. Please correlate the result with morphological findings other pertinent laboratory data, and clinical information

Flow Differential (%) and Population Analysis

Lymphocytes. %

Monocytes. %

Granulocytes. %

CD45 Dim. %

CD45 Neg. %

Plasma Cells %

Specimen Viability

A Flow cytometry bone marrow

Cell Yield

N/A

Markers Performed

CPT: 88189

Diagnosis at CLIA#

Milk
Mexican blend
ground beef
cereal
Lunch meat
Hummus

```
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line 2
line 3
line 4
```

THIS is
just a Test.

Booking.com - Cancellation

Monday, September 15, 2014

Facility: Lodge Yosemite Backpacks Lodge
Fax: 1 (1) 2121-234-3345
Attn: Raj Patel
Subject: [illegible]

Reservation Information
1538452-2451-265
Received: 09/15/2014 12:54:26 GMT

Dear

[illegible] Booking.com [illegible] Please [illegible] Thank You Booking.com

Yours Truly
Booking.com

Reservation Details

Number of Rooms:	1	Number of Nights:	2
Check-in:	October 6, 2014	Check-out:	October 8, 2014

Guest Name(s) and Credit Card Holder

First Name:	Sunny	Last Name:	Patwa

Total: $ 0.00

Special Request: Booking.com Booking ID:220013276
Room Reservation ID: 3614281.1
Name on Card:
Cancellation Amount: 0.0
Smoking: Yes

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TN225 c,m,y	$51.95
TN315 bk	$51.95
TN315 c,m,y	$51.95

CANON	
TONER	Our prices
104	$15.95
119	$51.95
120	$41.95
125	$25.95
128	$25.95
116 bk	$41.95
116 c,m,y	$51.95
118 bk	$51.95
118 c,m,y	$51.95

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CE285A	$26.95
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CE505X	$41.95
CF280A	$34.95
CF283A	$42.95
Q2612A	$25.95
Q2612X	$35.95
Q2613X	$41.95
CB436X	$71.95
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CE412A	$71.95
CB413A	$71.95

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E260A21A (E260/360/460)	$76.95
T650H21A (T650/652/654)	$175.00

SAMSUNG	
TONER	Our prices
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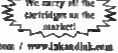

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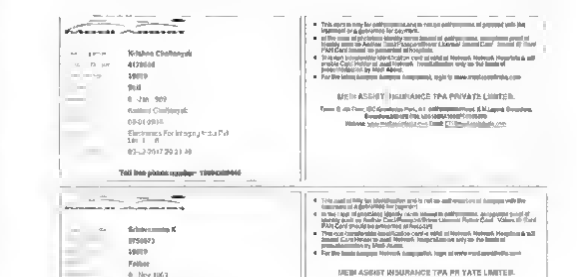

Krishna Chaitanya
4128608
10019
Male
8 Jan 1989
Kashmir Chaitanya
08-01-0910
Electronics For Imaging India Pvt Ltd
08-02-2017 20:21:40
Toll free phone number: 1800425006

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8750873
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Father
8 Nov 1967
Krishna Chaitanya
08-01-0910
Electronics For Imaging India Pvt Ltd
08-02-2017 20:21:40
Toll free phone number: 1800425006

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8750873
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2 Nov 1972
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Toll free phone number: 1800425006

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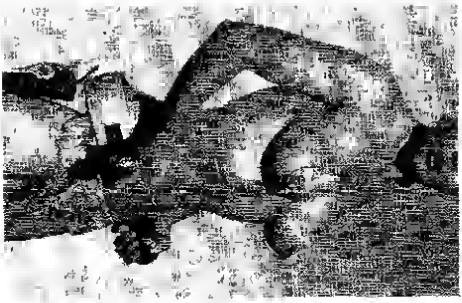
Jack Reacher Books

~~#1 Killing Floor (1997)~~ [1998 Barry Award] and [Anthony Award for Best First Novel]
~~#2~~ Die Trying (1998)
~~#3~~ Tripwire (1999)
~~#4~~ Running Blind (US title/The Visiter UK title (2000)
#5 Echo Burning (2001)
#6 Without Fail (2002)
#7 Persuader (2003)
#8 The Enemy (2004) Prequel set eight years before Killing Floor when he was still in the military
#9 One Shot (2005)
#10 The Hard Way (2006)
#11 Bad Luck and Trouble (2007)
#12 Nothing to Lose (2008)
#13 Gone Tomorrow (2009)
#14 61 Hours (Spring 2010)
#15 Worth Dying For (Fall 2010)
#16 The Affair (Fall 2011) This is another prequel
#17 A Wanted Man (Sept 2012)



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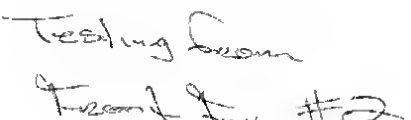

Sam's Club

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ANSWER SHEET

Part 1: General Science (GS)

1	Ⓐ Ⓑ Ⓒ Ⓓ	6	Ⓐ Ⓑ Ⓒ Ⓓ	11	Ⓐ Ⓑ Ⓒ Ⓓ	16	Ⓐ Ⓑ Ⓒ Ⓓ	21	Ⓐ Ⓑ Ⓒ Ⓓ
2	Ⓐ Ⓑ Ⓒ Ⓓ	7	Ⓐ Ⓑ Ⓒ Ⓓ	12	Ⓐ Ⓑ Ⓒ Ⓓ	17	Ⓐ Ⓑ Ⓒ Ⓓ	22	Ⓐ Ⓑ Ⓒ Ⓓ
3	Ⓐ Ⓑ Ⓒ Ⓓ	8	Ⓐ Ⓑ Ⓒ Ⓓ	13	Ⓐ Ⓑ Ⓒ Ⓓ	18	Ⓐ Ⓑ Ⓒ Ⓓ	23	Ⓐ Ⓑ Ⓒ Ⓓ
4	Ⓐ Ⓑ Ⓒ Ⓓ	9	Ⓐ Ⓑ Ⓒ Ⓓ	14	Ⓐ Ⓑ Ⓒ Ⓓ	19	Ⓐ Ⓑ Ⓒ Ⓓ	24	Ⓐ Ⓑ Ⓒ Ⓓ
5	Ⓐ Ⓑ Ⓒ Ⓓ	10	Ⓐ Ⓑ Ⓒ Ⓓ	15	Ⓐ Ⓑ Ⓒ Ⓓ	20	Ⓐ Ⓑ Ⓒ Ⓓ	25	Ⓐ Ⓑ Ⓒ Ⓓ

Part 2: Arithmetic Reasoning (AR)

1	Ⓐ Ⓑ Ⓒ Ⓓ	7	Ⓐ Ⓑ Ⓒ Ⓓ	13	Ⓐ Ⓑ Ⓒ Ⓓ	19	Ⓐ Ⓑ Ⓒ Ⓓ	25	Ⓐ Ⓑ Ⓒ Ⓓ
2	Ⓐ Ⓑ Ⓒ Ⓓ	8	Ⓐ Ⓑ Ⓒ Ⓓ	14	Ⓐ Ⓑ Ⓒ Ⓓ	20	Ⓐ Ⓑ Ⓒ Ⓓ	26	Ⓐ Ⓑ Ⓒ Ⓓ
3	Ⓐ Ⓑ Ⓒ Ⓓ	9	Ⓐ Ⓑ Ⓒ Ⓓ	15	Ⓐ Ⓑ Ⓒ Ⓓ	21	Ⓐ Ⓑ Ⓒ Ⓓ	27	Ⓐ Ⓑ Ⓒ Ⓓ
4	Ⓐ Ⓑ Ⓒ Ⓓ	10	Ⓐ Ⓑ Ⓒ Ⓓ	16	Ⓐ Ⓑ Ⓒ Ⓓ	22	Ⓐ Ⓑ Ⓒ Ⓓ	28	Ⓐ Ⓑ Ⓒ Ⓓ
5	Ⓐ Ⓑ Ⓒ Ⓓ	11	Ⓐ Ⓑ Ⓒ Ⓓ	17	Ⓐ Ⓑ Ⓒ Ⓓ	23	Ⓐ Ⓑ Ⓒ Ⓓ	29	Ⓐ Ⓑ Ⓒ Ⓓ
6	Ⓐ Ⓑ Ⓒ Ⓓ	12	Ⓐ Ⓑ Ⓒ Ⓓ	18	Ⓐ Ⓑ Ⓒ Ⓓ	24	Ⓐ Ⓑ Ⓒ Ⓓ	30	Ⓐ Ⓑ Ⓒ Ⓓ

Part 3: Word Knowledge (WK)

1	Ⓐ Ⓑ Ⓒ Ⓓ	8	Ⓐ Ⓑ Ⓒ Ⓓ	15	Ⓐ Ⓑ Ⓒ Ⓓ	22	Ⓐ Ⓑ Ⓒ Ⓓ	29	Ⓐ Ⓑ Ⓒ Ⓓ
2	Ⓐ Ⓑ Ⓒ Ⓓ	9	Ⓐ Ⓑ Ⓒ Ⓓ	16	Ⓐ Ⓑ Ⓒ Ⓓ	23	Ⓐ Ⓑ Ⓒ Ⓓ	30	Ⓐ Ⓑ Ⓒ Ⓓ
3	Ⓐ Ⓑ Ⓒ Ⓓ	10	Ⓐ Ⓑ Ⓒ Ⓓ	17	Ⓐ Ⓑ Ⓒ Ⓓ	24	Ⓐ Ⓑ Ⓒ Ⓓ	31	Ⓐ Ⓑ Ⓒ Ⓓ
4	Ⓐ Ⓑ Ⓒ Ⓓ	11	Ⓐ Ⓑ Ⓒ Ⓓ	18	Ⓐ Ⓑ Ⓒ Ⓓ	25	Ⓐ Ⓑ Ⓒ Ⓓ	32	Ⓐ Ⓑ Ⓒ Ⓓ
5	Ⓐ Ⓑ Ⓒ Ⓓ	12	Ⓐ Ⓑ Ⓒ Ⓓ	19	Ⓐ Ⓑ Ⓒ Ⓓ	26	Ⓐ Ⓑ Ⓒ Ⓓ	33	Ⓐ Ⓑ Ⓒ Ⓓ
6	Ⓐ Ⓑ Ⓒ Ⓓ	13	Ⓐ Ⓑ Ⓒ Ⓓ	20	Ⓐ Ⓑ Ⓒ Ⓓ	27	Ⓐ Ⓑ Ⓒ Ⓓ	34	Ⓐ Ⓑ Ⓒ Ⓓ
7	Ⓐ Ⓑ Ⓒ Ⓓ	14	Ⓐ Ⓑ Ⓒ Ⓓ	21	Ⓐ Ⓑ Ⓒ Ⓓ	28	Ⓐ Ⓑ Ⓒ Ⓓ	35	Ⓐ Ⓑ Ⓒ Ⓓ

Part 4: Paragraph Comprehension (PC)

1	Ⓐ Ⓑ Ⓒ Ⓓ	4	Ⓐ Ⓑ Ⓒ Ⓓ	7	Ⓐ Ⓑ Ⓒ Ⓓ	10	Ⓐ Ⓑ Ⓒ Ⓓ	13	Ⓐ Ⓑ Ⓒ Ⓓ
2	Ⓐ Ⓑ Ⓒ Ⓓ	5	Ⓐ Ⓑ Ⓒ Ⓓ	8	Ⓐ Ⓑ Ⓒ Ⓓ	11	Ⓐ Ⓑ Ⓒ Ⓓ	14	Ⓐ Ⓑ Ⓒ Ⓓ
3	Ⓐ Ⓑ Ⓒ Ⓓ	6	Ⓐ Ⓑ Ⓒ Ⓓ	9	Ⓐ Ⓑ Ⓒ Ⓓ	12	Ⓐ Ⓑ Ⓒ Ⓓ	15	Ⓐ Ⓑ Ⓒ Ⓓ

Part 5: Mathematics Knowledge (MK)

1	Ⓐ Ⓑ Ⓒ Ⓓ	6	Ⓐ Ⓑ Ⓒ Ⓓ	11	Ⓐ Ⓑ Ⓒ Ⓓ	16	Ⓐ Ⓑ Ⓒ Ⓓ	21	Ⓐ Ⓑ Ⓒ Ⓓ
2	Ⓐ Ⓑ Ⓒ Ⓓ	7	Ⓐ Ⓑ Ⓒ Ⓓ	12	Ⓐ Ⓑ Ⓒ Ⓓ	17	Ⓐ Ⓑ Ⓒ Ⓓ	22	Ⓐ Ⓑ Ⓒ Ⓓ
3	Ⓐ Ⓑ Ⓒ Ⓓ	8	Ⓐ Ⓑ Ⓒ Ⓓ	13	Ⓐ Ⓑ Ⓒ Ⓓ	18	Ⓐ Ⓑ Ⓒ Ⓓ	23	Ⓐ Ⓑ Ⓒ Ⓓ
4	Ⓐ Ⓑ Ⓒ Ⓓ	9	Ⓐ Ⓑ Ⓒ Ⓓ	14	Ⓐ Ⓑ Ⓒ Ⓓ	19	Ⓐ Ⓑ Ⓒ Ⓓ	24	Ⓐ Ⓑ Ⓒ Ⓓ
5	Ⓐ Ⓑ Ⓒ Ⓓ	10	Ⓐ Ⓑ Ⓒ Ⓓ	15	Ⓐ Ⓑ Ⓒ Ⓓ	20	Ⓐ Ⓑ Ⓒ Ⓓ	25	Ⓐ Ⓑ Ⓒ Ⓓ

My name is Tinker

7:07

٤٦٤-٤٦٥-٢٤٣
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Bandwidth Saver	High (80 kbps)
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Troubleshooting Steps

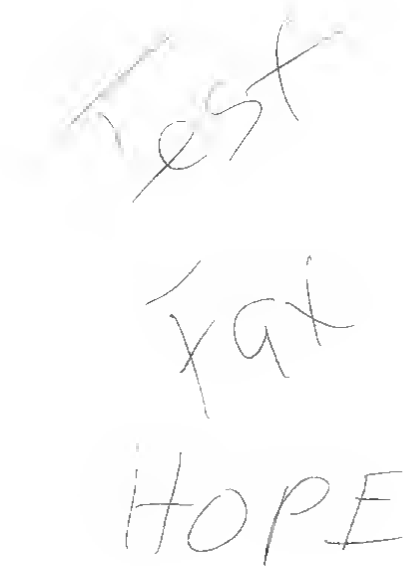
The steps below will help you resolve common faxing problems.

- Switch off fax machine and unplug power adapter from device and from wall outlet.
  - Let fax machine remain off for 60 seconds.
- Try a different phone cord between the fax machine and the Vonage device.
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device, bypassing any home wiring.
- If using an All-In-One device, temporarily disconnect device from PC.

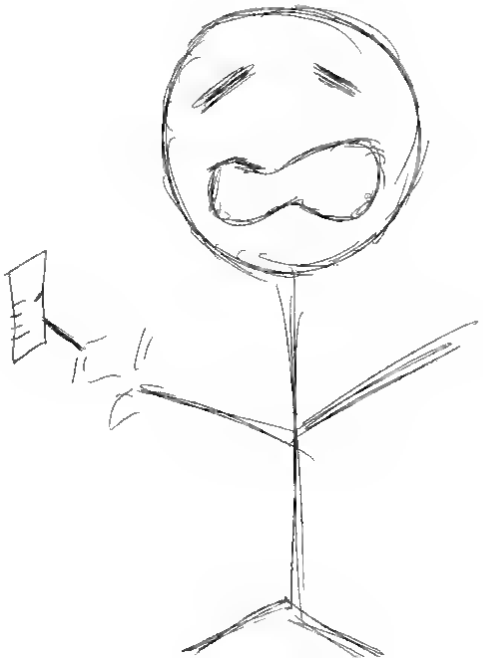
Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help.

Call us at 1 VONAGE-HELP (1-866-243-4357) or visit **www.vonage.com**


Test
HOPE

Marlene
Toland.



TEST
LEP

Test Fax

Good evening

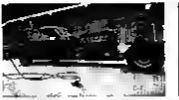
Throwback photos of Ivanka Trump's modelling career

Photos

Food & Drink

This Thanksgiving dinner will set you back $76,000

The Sun



Autos

Builder gives vintage Volvo a crazy 38-liter tank engine

Jalopnik

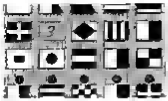
Money

Yellen says she'll leave the Fed once Powell takes over

Bloomberg

Better Than Bitcoin: New Tech Set to Soar 8,000%

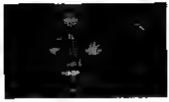
Banyan Hill Publishing · Sponsored



Lifestyle

Can you guess which flag comes next in this puzzle?

Reader's Digest



US

12-year-old taking medical marijuana sues Jeff Sessions and DEA

CBS News

7 View State Versus Session State

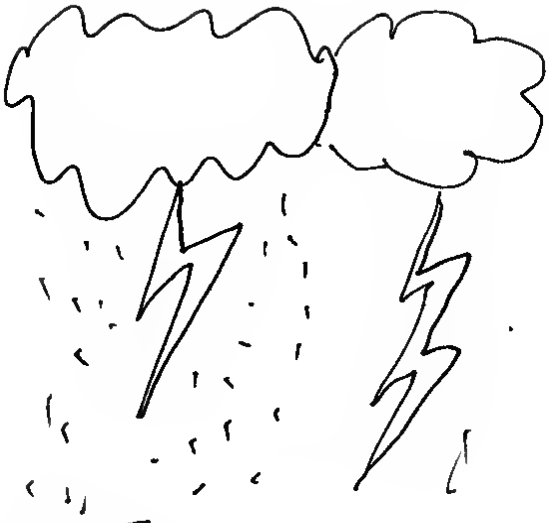
Session/State should be avoided as much as possible. We have made a class called SessionAccess that contains all the information we need for a session. We store small things in there. We do not want to store a big object since this will be duplicated in memory for each session (unless we store the session some other place). If you need to store some new data, use SessionAccess if possible. Please discuss first to make sure this is the right decision.

06/07/2016 11:23

Qty	Description
1	Fax Long Distance - 7000003 (1 213-946-2945)

SKU 7000003 QTY 1

Test Page


Testing

8553301239

Test 4

FAX #

DJS

[COMPANY NAME]

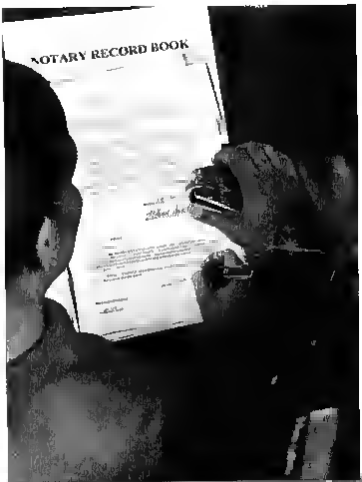
FACSIMILE TRANSMITTAL SHEET

TO	FROM
[Name]	[Name]
COMPANY:	DATE:
[Company Name]	12/28/2011
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
[fax]	[number of pages]
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
[phone]	[reference number]
RE:	YOUR REFERENCE NUMBER:
[subject of fax]	[reference number]

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

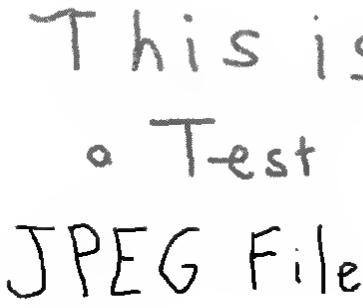
Select this text and delete it or replace it with your own. To save changes to this template for future use, click **Save As** on the **File** menu. In the **Save as type** box, click **Document Template**. Next time you want to use it, click **New** on the **File** menu, and then double-click your template.



Our notary services are one more way we make life easier.

The UPS Store

Biggest Fax

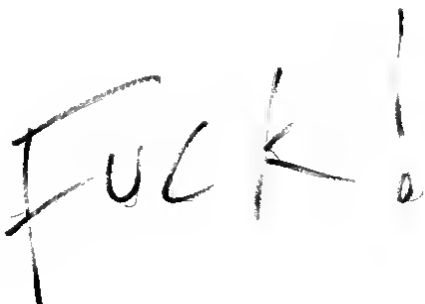

This is
a Test
JPEG File

HP Officejet G Series G85
Personal Printer/Fax/Copier/Scanner

Fax History Report for
[redacted]
8659776699
Dec 28 2008 9:58pm

Last Fax

Date	Time	Type	Identification	Duration	Pages	Result
Dec 28	9:57pm	Sent	2120075	0.00	0	No answer



1-855-330-1239

Test from EMS

FaxTOY.net

American Family Vision Clinic
Levi Zurcher OD, Marlene Inverso OD, John Inverso OD

406 Suite A Lilly Rd NE
Olympia WA 98506

Telephone (360) 491-2121
Facsimile (360) 459-1097
www.AFVSee.com

Diabetes Eye Exam Report

From Levi Zurcher OD

To wdwdw

Patient Information

Name dwxdwwwf DOB

Diabetes Mellitus: [X] Type II [ ] Type I [ ] Gestational [ ] Pre-diabetic
Duration of Diabetes (years)

Current Diabetes Therapy [X] Oral Hypoglycemic [ ] Insulin [ ] Diet Control [ ] None

Patient Reports under control [X] yes [ ] no

HbA1C Results of last blood glucose reading

Exam Findings for Date

Visual Acuity (best corrected) OD OS

Intraocular Pressure OD [ ] Within Normal Limits [ ] Above Normal
OS [ ] Within Normal Limits [ ] Above Normal

[ ] Dilated Fundus Exam Performed

Diagnosis

No Diabetic Retinopathy [ ] OD [ ] OS

Non-Proliferative Diabetic Retinopathy
- Mild [X] OD [ ] OS
- Moderate [ ] OD [ ] OS
- Severe [ ] OD [X] OS

Proliferative Diabetic Retinopathy [ ] OD [ ] OS

Clinically Significant Macular Edema [ ] OD [ ] OS

Plan

[ ] Monitor Only
[ ] Additional Testing/Treatment

Management

[X] Follow-up in awd months

[ ] Referral To

[X] Other

Additional Information/comments

dwdwdw

Tuesday, January 21, 2014

Confirmation Date/Transaction
[illegible]
[illegible]

[illegible]

[illegible]

[illegible]
Test

[illegible]			
[illegible]		[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]

[illegible]			
First Name	Test	Last Name	test

[illegible]

[illegible]			
[illegible]	[illegible]	[illegible]	[illegible]

[illegible]

Windows Printer Test Page

You have correctly installed your Canon Generic Plus UFR II on SANDRA-PC

PRINTER PROPERTIES

Submitted Time	2:17:08 PM
Date:	11/10/2017
User Name	SANDRA-PC\Sandra
Computer Name:	SANDRA-PC
Printer Name	iR-ADV 400
Printer Model:	Canon Generic Plus UFR II
Color Supported:	No
Port Name(s):	IP_192.168.0.179
Data Format:	RAW
Printer Share Name:	
Print Processor:	winprint
OS Environment:	Windows x64

PRINT DRIVER PROPERTIES

Driver Name:	Canon Generic Plus UFR II
Driver Type:	Type 3 - User Mode
Driver Version:	1.1.0.0

ADDITIONAL PRINT DRIVER FILES

C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0mui.dat_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0en-US_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0ar_SA_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0es-ES_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0ca-ES_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0cs_CZ_DS16C.DLL
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C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0nl_NL_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0fi-FI_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0fr_FR_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0de_DE_DS16C.DLL
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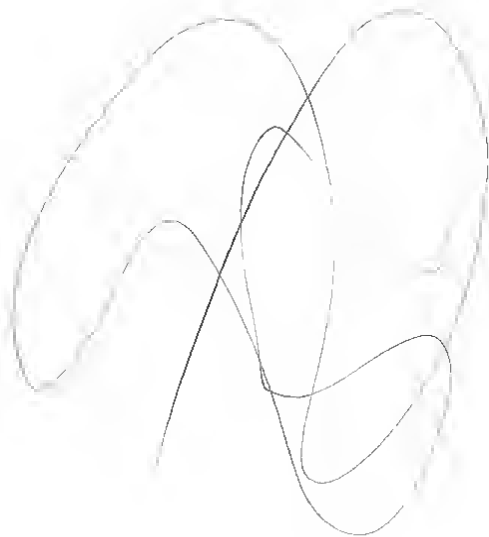
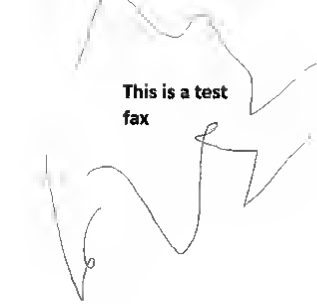
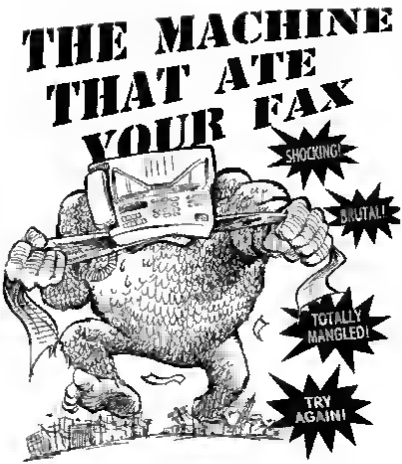
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0it_IT_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0ja_JP_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0ko_KR_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0ms_MY_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0nb_NO_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0pl_PL_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0pt_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0ru_RU_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0zh-CN_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0zh-TW_DS16C.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\CNLB0sk-SK_DS16C.DLL
...




This is a test
fax

Attn: Fax Toy To:



This Is A Test

To **Fax Toy**

From **Cleartake**

Our fax number **5555555555**

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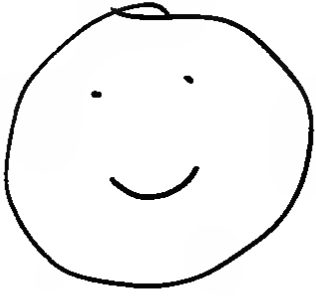
Test



Ficus Whitefly
A New Pest in South Florida

Introduction: There is a new pest attacking ficus trees and hedges in Miami-Dade, Broward and Palm Beach Counties, Florida. This pest was identified as the fig (ficus) whitefly, *Singhiella simplex*, and is a new US continental record. Whiteflies are small, winged insects that belong in the Order Hemiptera which also includes aphids, scales, mealybugs and bugs. These insects typically feed on the underside of leaves with their "needle-like" mouthparts. Whiteflies can seriously injure host plants by sucking juices from them causing wilting, yellowing, stunting, leaf drop, or even death.

Description and Damage: The leaves of ficus trees infested with whiteflies begin to turn yellow before the leaves are dropped from the plant. Ficus trees without their leaves are one of the most obvious symptoms of a whitefly infestation. This whitefly has been most commonly found infesting weeping fig (*Ficus benjamina*) but has also been reported on *F. altissima* (lofty fig, false banyan tree) *F. bengalensis* (also called "banyan tree"), *F. microcarpa* (Cuban laurel), *F. aurea* (strangler fig) *F. lyrata* (fiddle-leaf fig), and *F. maclellandi* (= *F. binnendijkii*) (banana-leaf fig). This whitefly may eventually be found on other species of ficus.

If the foliage is disturbed the small, white gnat-like adult whiteflies can be seen flying from the foliage. The adult whitefly resembles a very small moth with a yellow body and white wings with a faint gray band in the middle of the wings. Immature stages (eggs and nymphs) can be found primarily on the underside of the leaves. Prior to adult emergence, the nymphs are tan to light green discs with red eyes. The underside of infested leaves look like they are dotted with small, silver or white spots which are actually the empty "skin" of the pupae after the adult emerges.

Biology: The life cycle of the ficus whitefly is approximately one month. Eggs which are usually laid on the underside of leaves hatch into a crawler stage. The crawler wanders around the leaf until they begin to feed. From this point until they emerge as adults they are

UF FLORIDA

213-294-2943

GOD BLESS

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Credits:

1527

TEST

AAAAAAAA

GS TEST

lkalkasldkrlaksnefs

Test

OK

Test

FAX

Broadvoice

Test
Fax

Thanx!

BACKOFFICE

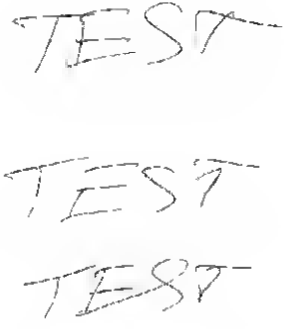
TEST

FAX

1-888-877-1655

1-503-200-1300

Test slide 1

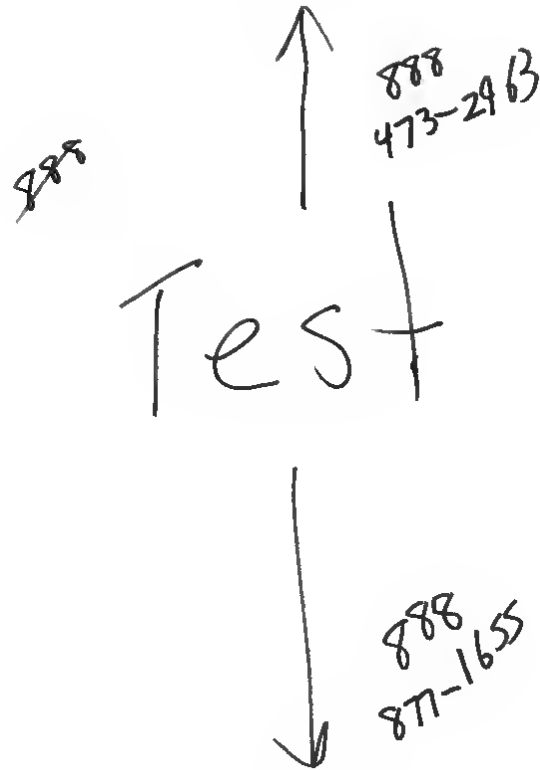

TEST
TEST
TEST

HOWDY-HO!!!

Test 2

TEST

FAX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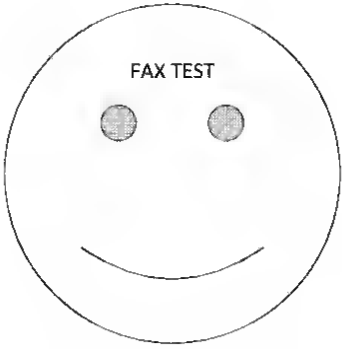
473-2963
888
Test
888
877-1655


FAX TEST

This is a test link

Test fax from Circuit ID

Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your RICOH PCL6 UniversalDriver V4.9 on SERVER.

The information below describes your printer driver and port settings.

Submitted Time	1:04:58 PM 4/11/2018
Computer name	SERVER
Printer name	\\SERVER\Rancho
Printer model	RICOH PCL6 UniversalDriver V4.9
Color support	NO
Port name(s)	rancho grangettos local
Data format	RAW
Share name	Rancho
Location	Rancho Santa Fe Store
Comment	
Driver name	ricu09gr.dll
Data file	ricu09cd.psz
Config file	ricu09ui.dll
Help file	ricu09ch.chm
Driver version	32.00
Environment	Windows x64
Monitor	ricu09lm

#2

Additional files used by UNIDRIVER:

C:\Windows\system32\spool\DRIVERS\x64\3\ricu09ui.rrj	
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09ui.rdj	
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09ui.rcf	
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09ug.dll	(3 7 60 2)
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09ug.mfz	
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09ur.dll	
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09gl.dll	(1, 0, 5, a)
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09cl.dll	(5 3 4 0)
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09cd.dll	(3 7 60 2)
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09cf.cfz	
C:\Windows\system32\spool\DRIVERS\x64\3\ricu09cl.nnl	
C:\Windows\system32\spool\DRIVERS\x64\3\rdu09cr.dlz	
C:\Windows\system32\spool\DRIVERS\x64\3\[illegible].dll	(1 0 0 0)
C:\Windows\system32\spool\DRIVERS\x64\3\[illegible].dll	(1 0 2 2)
C:\Windows\system32\spool\DRIVERS\x64\3\[illegible]cb.dll	(1 0 5 12)
C:\Windows\system32\spool\DRIVERS\x64\3\[illegible].dll	(1 0 0 0)
C:\Windows\system32\spool\DRIVERS\x64\3\[illegible].dll	(1 0 4 0)
C:\Windows\system32\spool\DRIVERS\x64\3\mfricu09ui.dll	(1 0 6 0)
C:\Windows\system32\spool\DRIVERS\x64\3\RDOIkrnl.dll	(1 0 4 0)

This is the end of the printer test page.

ETO AIR FORCE

#2

213-294-2943

test

This is a test fax sent by GFI FaxMaker.

TEST

This is a test fax sent by GFI FaxMaker.

Fax Send Image

Date & Time : FEB-13-2014 10:23PM THU
Model Name : M1165mfs Mono MFP
Machine Serial Number : C1786x1

No	Name/Number	Start Time	Time	Mode	Page	Result
001	5128828228	02.13 22:23PM	00'20"	G3	000/001	CANN Error

CUSTOMER NUMBER:

Return Form

PLEASE PROVIDE THE PURCHASER'S ADDRESS AS WELL AS THE ADDRESS YOU WOULD LIKE YOUR REFUND SHIPPED TO.

PURCHASER ADDRESS:

SHIP TO:

PLEASE SUPPLY YOUR DAYTIME PHONE NUMBER:
IN CASE WE NEED TO REACH YOU CONCERNING YOUR EXCHANGE/RETURN

AND EVENING PHONE NUMBER:

Reason for Return	Qty.	Item Number	Description	Unit Price	SKU	UPC/MPC#

[redacted]

Reason For Return (Use the reason that best describes your return)

14 Ordered too small	45 Received too late	71 Returning a gift
30 Ordered too large	47 Received incorrect item	72 Changed my mind
34 Product damaged in shipment	48 Ordered received item	79 General defective
37 Not as described or pictured	70 Ordered mistakenly/received	80 Quality not as expected

[redacted]

Item from

- ☐ Purchased by me
- ☐ A Gift (Purchaser's Name_____)

(Gifts may be returned for an exchange or a gift certificate toward a future purchase)

Action to be Taken:

- ☐ Exchange: Use the form provided below (Regular shipping charges will be waived on exchanges.)
- ☐ Refund: The type of refund will be determined by the payment method used on original purchase.
- ☐ Gift Certificate

Qty.	Catalog Number	Size	Color	Description	Price

If your exchange items are more expensive, just enclose a check or provide credit card information below

☐☐☐☐-☐☐☐☐ ☐☐☐☐-☐☐☐☐ ☐☐-☐☐ _____

Account Number Expires Signature (required by credit card companies)

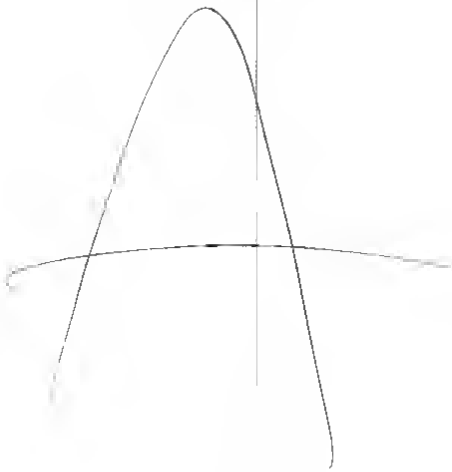
Additional Comments:

_____

_____

_____

[redacted]



WEDDIN

CRASHE

11/19/2004 FRI 12:28 [redacted] P001

*** TRANSMIT OK ***

JOB NO. 1485
DATE TIME 11/19 12:25
PAGES 1
FILE NAME

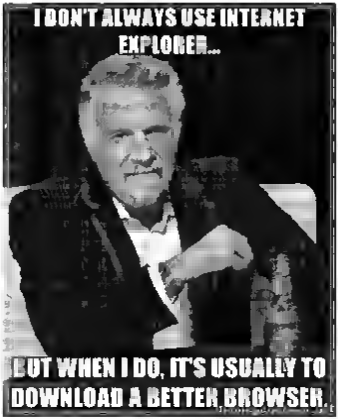
TX RESULT OK
TRANSACTION NO. -----
ERROR -----
10553801880

Rent to own:

Lynn & Healy Harps

VAharpcenter.com

Types: Ogden - 34 strings
Troubadour - 38 strings
Prelude - 40 strings


I DON'T ALWAYS USE INTERNET EXPLORER...
BUT WHEN I DO, IT'S USUALLY TO DOWNLOAD A BETTER BROWSER.

October 13, 2011

Hi Nat

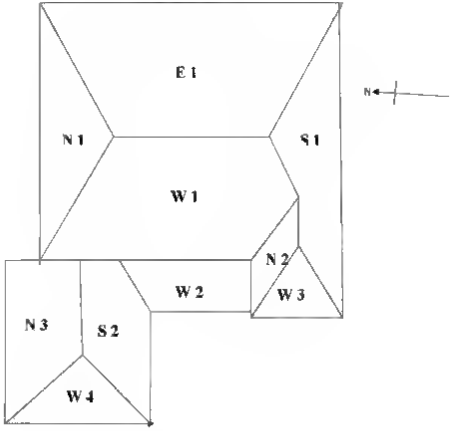
TESTING TO SEE IF MY FAX MACHINE IS WORKING.

JUDY D. COOPER
PHONE # 314-631-2101

Test fax

2016

Back of the house



Front of the house

This is A
TEST FAX
FROM
760-537-1185

AHS Test Fax

- Registrar's Office

855-330-1239

FAMILY DOLLAR

my family my family dollar
STORE #3179 2415 Highway 46
Deltona FL 561 758 2907

1MUKILE RTR OPEN DENOM 10 10 1 30 00

**********00
APPROVED
AUTH# 000000000002843154O1
INVOICE # 7211
04-25-2013 10 33 26
SEQUENCE NO 0283180206931

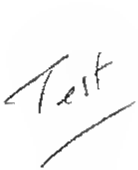
	$30.00
TOTAL	$40.00
CASH	$10.00
CHANGE	

ALL PREPAID, WIRELESS, VISA
MASTERCARD AND GIFT CARD
SALES ARE FINAL NO REFUNDS

9005810017211015203

ITEMS 1
04-25-2013 17 33 32 0081 01 #3179 7211

Open Mon-Sun 8am-10pm


Test

TEST
FAX

[illegible] User Address	[illegible] Street Address, City, ST 00000

FAX

To: 650.350.61	From:
Fax:	Pages:
Phone:	Date:
Re:	CC:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply

SBA

Corporate Headquarters, 221 Crossways Park Dr

Woodbury NY 11797 800-343-5545

FOR INFORMATION CALL

EWR

07/16/2013

SDS-001

SERVICE STATION TRACKING NUMBER

SDS-001

ORIGIN 0651

EWR JFK

SHIPPER 123

ShipperTest

10 Main Rd.

Edison, NJ, 08817

8170119383

RECEIVER 999

120 Second St.

Brooklyn NY 112 8,

7150930383

BILL TO:

BILLING TO SHIPPER

ShipperTest

DELIVERY INSTRUCTIONS, MBD by 06/17/2013

testing.

Test Special Instructions

PIECES DESCRIPTION WEIGHT DIMENSIONS LENGTH WIDTH HEIGHT

RECEIVED FREIGHT IN GOOD ORDER

RECEIVER'S SIGNATURE

PRINT RECEIVER'S NAME

TELEPHONE NUMBER

SDS-001

TRACKING NUMBER

DATE

TIME

Must Deliver No Later Than 06/21/2013

TOTAL CHARGES

EVALUATION OF MS. DUKES' WORLD HISTORY CLASS
2nd Semester - SY2011-2012

DIRECTIONS: This evaluation is anonymous, so please answer honestly and constructively. Thanks for a great year! Good luck next year.

1. Which unit(s) do you remember **most** from 2nd Semester World History? WHY?

2. Which unit(s) do you remember **least** from 2nd Semester World History? WHY?

3. Which project(s) was your favorite? WHY? (Unit 7 Age of Exploration Project, Unit 9 Revolutions Project, Unit 9 Industrial Revolution DBQ or Unit 12 Cold War Presentation?)

4. What has been the best part of World History class? WHY?

5. What has been the worst part of World History class? WHY?

6. What other recommendations or suggestions do you have to make World History a better class next year? (You may continue on the back.)

TRANSMISSION VERIFICATION REPORT

TIME 03/13/2018 23:02

pdfFactory Pro Trial Version

Test fax from Circuit ID

Service Canada

Canada Pension Plan
P.O Box 9664
Postal Station T
Ottawa, Ontario
K1G 0M8

Régime de pensions du Canada
Case postale 9664
Succursale T
Ottawa (Ontario)
K1G 0M8

IF UNDELIVERABLE, RETURN TO:
SI NON LIVRABLE, RETOURNER À

CANADA POSTES
POST CANADA
Postage paid / Port payé
Lettermail / Poste-lettres
4096061

Misc

Received
Dec 29/08

CPP Contributions

ISP-CPP-SOC-08

Supp

First Last,
xxxx Street Ave
Phoenix, UT nnnnn
Phone (123) 456-7890, Fax. (206) 309-0000

Fax

To: me	**From:** Some Body
Fax: (888) 877-1955	**Pages:** 0 (including cover)
Phone	**Date:** 6/12/2014
Re:	**CC:**

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

• Comments:

THIS IS A TEST (8pt bold)	THIS IS A TEST (8p)
THIS IS A TEST (9pt bold)	THIS IS A TEST (9p)
THIS IS A TEST (10pt bold)	THIS IS A TEST (10p)
THIS IS A TEST (11pt bold)	THIS IS A TEST (11p)
THIS IS A TEST (12pt bold)	THIS IS A TEST (12p)

LSI
-I
SET
SET
TST
TTb
TST
SI
SET
MSET
TIFF

From: TP_Mail@ea.epson.com
To: mayer@8643666222@Fax
cc:
Subject: Test Fax

Dear mayer
Per our conversation, I me sending you a test fax

If you are able to read this message we have verified that your Epson Multifunction device is properly configured for fax communication

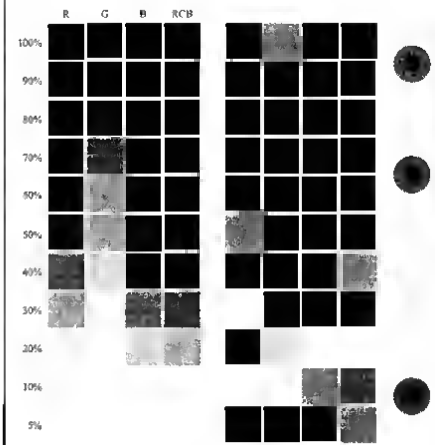
Should you require further assistance with this issue, please contact our technical support team at
(562) 276-4382

Please reference your call log number when calling

Thank you again for contacting Epson
Support Rep : Shawn
Call Log Number

From COM2

Test Page



The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog.
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The quick brown fox jumps ove
The quick brown fox jump

Sam's CLUB

Instant Savings

June 21–July 16

Look inside for more than $5,600 in offers

Make your summer sizzle with great values.

A. REQUEST FOR POLICY LOAN OR PARTIAL WITHDRAWAL

Please check one of the following:

Policy Loan - The undersigned requests the following policy loan in accordance with the terms set forth in the policy contract.

☐ Maximum Available Cash Loan ☐ New Cash Loan in the amount of $__________

Partial Withdrawal - The undersigned requests the following partial withdrawal, in accordance with the terms set forth in the policy contract.

☐ Maximum Available Partial Withdrawal__________ ☐ Net Partial Withdrawal in the amount of $__________

The undersigned requests that the above be [illegible] [illegible] partial withdrawal, be paid to the policyowner. The undersigned understands that [illegible] [illegible] [illegible]

[illegible]

B. FEDERAL INCOME TAX WITHHOLDING/IRS CERTIFICATION

[illegible] **NOTE**: Withholding [illegible]

☐ I DO NOT want Federal income tax withheld [illegible]

☐ I DO want Federal income tax withheld from my distribution $____ or ____%

IRS CERTIFICATION: Under penalties of perjury, I certify that:

[illegible]

1. [illegible] backup withholding [illegible]

Social Security Number __________ or Taxpayer Identification Number (TIN): __________

C. COMMUNITY PROPERTY STATES

If you currently reside in one of the following states (or Puerto Rico) please complete the additional information below.

Arizona	Louisiana	Texas
California	New Mexico	Washington
Idaho	Nevada	Wisconsin

1. If you have never been married, please acknowledge by signing here.

____________________ __________

Signature Date

2. If you are currently married, your spouse must consent to the transaction by signing here.

____________________ __________

Spouse's Signature Date

3. If your spouse is deceased, please attach a copy of the Death Certificate.

4. If you are divorced:

   A. and the policy was included in the Divorce Decree or Property Settlement Agreement and was awarded to you, please attach a certified copy of the document. Spouse's consent not required.

   B. and the policy was not included in the Divorce Decree or Property Settlement Agreement, it will be necessary for your ex-spouse to consent by signing here.

TEST FAX

ATTN: DALE PRINGLE

MGK
MAIN

Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP L3300-400 color MFP M375 M475 PCL 6 on SBS2K8.

The information below describes your printer driver and port settings

Submitted time	11:00:50 AM 6/20/2018
Computer name	SBS2K8
Printer name	FllR Room Color Printer
Printer model	HP L3300-400 color MFP M375-M475 PCL 6
Color support	YES
Port name(s)	192.168.1.25
Data format	RAW
Share name	FllR Room Color Printer
Location	File Room
Comment	
Driver name	unidrv.dll
Data file	hpcm3756.gpd
Config file	hpmdl120.dll
Help file	unidrv.hlp
Driver version	6.00
Environment	Windows x64

Additional files used by this driver:

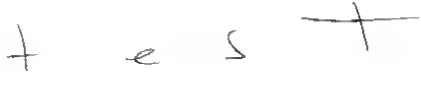
C:\Windows\system32\spool\DRIVERS\x64\3\hpcm3756.cfg	
C:\Windows\system32\spool\DRIVERS\x64\3\hpdcfgrc.DLL	(1, 0, 4, 101)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcm3756.xml	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcsc120.DTD	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcm375u.INI	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcP6.hmx	
C:\Windows\system32\spool\DRIVERS\x64\3\hpc6m120.GPD	
C:\Windows\system32\spool\DRIVERS\x64\3\hpchm120.SBd	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcsm120.GPD	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcdmc64.DLL	(1, 0, 4, 101)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcui120.DLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcpr120.PLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpc3r120.dll	(61 120 04 12282)
C:\Windows\system32\spool\DRIVERS\x64\3\hpc6r120.DLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcdr120.dll	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\ciouw.dll	(13 2 1 51)
C:\Windows\system32\spool\DRIVERS\x64\3\CIOUW64.mef	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcst120.PLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcur120.dll	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpmsn120.DLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpmns120.DLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcsn120.dre	
C:\Windows\system32\spool\DRIVERS\x64\3\hpcsat20.dll	(0, 3, 12, 12)
C:\Windows\system32\spool\DRIVERS\x64\3\hpcey120.PLL	(61 120 04 12262)
C:\Windows\system32\spool\DRIVERS\x64\3\pclxl.DLL	(6 0 5479 0
(vista_wcp_dz_drivers_060801.2007))	
C:\Windows\system32\spool\DRIVERS\x64\3\pjl.GRD	
C:\Windows\system32\spool\DRIVERS\x64\3\pclxl.GPD	
C:\Windows\system32\spool\DRIVERS\x64\3\HPCHL120.CAB	
C:\Windows\system32\spool\DRIVERS\x64\3\UNIRES.DLL	(6 0 6000 16386
(vista_rtm.061101-2205))	
C:\Windows\system32\spool\DRIVERS\x64\3\UNIRES.DLL	(6 0 6000 16386

VFAX TEST

04/26/2017

Margaret Emerson

TEST
TLC



1-855-330-1239

AUGUSTA HOSPITAL CORPORATION
PO Box 1000, Fisherville, VA 22939
Authorization for Release of Medical Information

CHRISTOPHER LEE CARLTON
Patient (please print) Full name

09/23/1965
Birth date (Mo/Day/Yr)

103 W STREET
Street Address

266-93-2886
Social Security Number

EUREKA CA 95501
City State, Zip code

(707) 771-0809
Phone (Home)

I CHRISTOPHER LEE CARLTON hereby authorize AUGUSTA Hospital Care to release:
(Patient Name) (Name of Facility)

- ✓ DISCHARGE SUMMARY
- ✓ HISTORY & PHYSICAL
- ✓ PROGRESS NOTES
- ✓ OPERATIVE NOTES
- ✓ PATHOLOGY REPORTS
- ✓ LABORATORY REPORTS
- ✓ RADIOLOGY REPORTS
- ✓ EKG/EEG/CARDIAC CATH
- ✓ EMERGENCY REPORTS
- ✓ ENTIRE RECORD
- ✓ OTHER ANY (please specify)

For the dates of: OCT 2009 THROUGH JAN 2010

X I do ___ I do NOT authorize release of information related to AIDS (Acquired immunodeficiency Syndrome) or HIV (Human Immunodeficiency Virus) Infection, psychiatric care and/or psychological assessment, and treatment for alcohol and/or drug abuse.

INFORMATION RELEASE TO

CHRIS CARLTON
Name of Company/Agency/Facility/Person

103 W STREET
Street Address

EUREKA CA 95501
City State, Zip

PURPOSE OF DISCLOSURE.

___ REFERRAL TO SPECIALIST ___ INSURANCE X WORKERS COMP X CHANGE OF DOCTOR
___ LEGAL INVESTIGATION X PERSONAL X CONTINUING CARE ___ DISABILITY DETERMINATION

OTHER (specify) _____

- **Please provide current telephone number in the event we need to contact you** 707 771-0809
- If I have questions about disclosure of my health information, I can contact Health Information Management @ 332-4602 or 332-4606.
- Upon request, I will be given a copy of this authorization form after signing.
- If I hereby authorize disclosure of the health information for the above named patient. This authorization is valid for 12 months from the date of signature. I understand that I may cancel this request with written notification but that it will not affect any information released prior to notification of cancellation. I understand that the information used or disclosed may be subject to redisclosure by the person or class of persons or facility receiving it, and would then no longer be protected by federal regulations. I understand that the medical provider to whom this is authorized may not condition the provision of treatment on whether or not I sign the authorization.

Signature of Individual or parent/guardian or Legal Representative of patient's estate — Date: 8/13/2010

Signature of Witness — Date: 8/14/2010

Average turn-around-time is 15 days. Please be prepared to produce a photo ID when requesting or picking up records.

Photo ID verified by _____

Note: There will be a charge for a personal copy of your records. Healthport has been contracted to provide this service and will invoice you directly.

MEDICAL INFORMATION RELEASED BY HEALTHPORT

ENTIRE ____ LAB ____ EKG ____
DIs ____ HP ____ OP ____
PATH ____ RAD ____ IMMUNIZATIONS ____
OTHER ____

ROI SPECIALIST

1 23

4 5 6 7

QWERTY

WTF?

A0457AAFA0457A,LMMMIMMMFALMMMMM31=25012=43

BARRIERREEF
Freedom Pools

Date: 2017-Jul-12
Page: 1 of 1

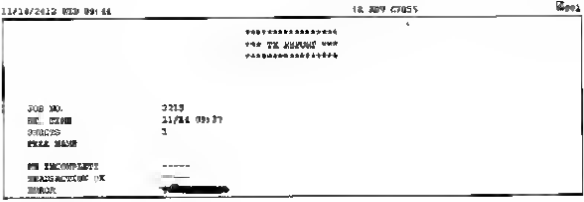
FAX

Barrier Reef Pools
165 Evans Way
Timmonsville, SC 29161
843-326-7136
www.brpoolsusa.com

FROM: Bob
8433267182
9999999991
bob@bob.com

FOR: Faxtoy
12132942943

MESSAGE:
Test fax


11/10/2012 WED 09:44 [redacted] 18 209 67855 P001

*** TX JOURNAL ***

JOB NO. 3213
ST. TIME 11/24 09:37
PAGES 1
FILE NAME

FR INCOMPLETE -----
TRANSACTION OK ----
ERROR [redacted]

TEST FAX

Ryan Specialty Group

RTSpecialty

FAX

An: Faxloy
Fax-Nr.: 0018888771655

Von: Daniel Wamara

Datum: 24/06/2014

Betreff: test

test

Barrera Group List of Services

Mission

Serve the community through professional services by experts in the services offered. Expand knowledge and financial education to our clients and exceed their needs. Every Barrera Group representative has the capacities to assist and fulfill our clients with excellent customer service

Vision

With our top services Barrera Group is the number 1 financial service company dedicated to provide excellence for our community. Providing financial education for our current generation to lead the way for future generations is the main reason we are positioning our organization by expanding in the next 5 years to be the number one in our field with each of our services

Since 1996 Barrera Group has grown and has gained a position in the market place as we have maintained our doors open in good standing amongst a volatile and fluctuating economy in the last 18 years.

Insurance

Programs FSC Rater

F & C Auto Insurance has been our number 1 service throughout our 18 years in the market

Auto Insurance we insure personal vehicles from our California limit requirements and our high limits as well We are able to customize prices depending on the needs of the client We insure vehicles with special equipment such as rims, stereo surround sound systems.

Our method of explaining to our clients is a very simple approach where we show the reality of how limits work

Scenario 1

15,000/30 000/10,000

Seecnario 2
15,000/30 000/10,000
15 000/30 000/4 500

Scenario 3
500/500 OR 1000/1000

1-888-877-1655

Text

Fax

BACK OFFICE

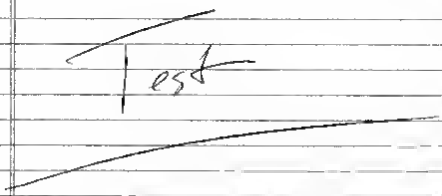
TEST

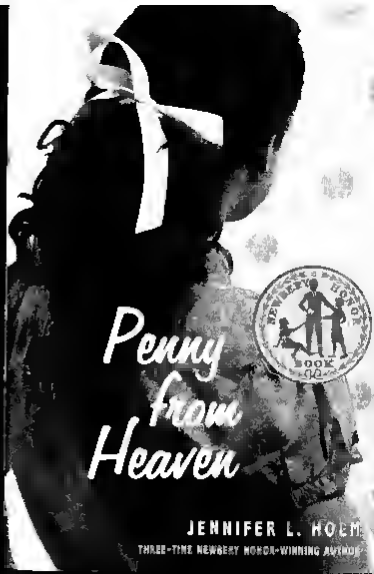
FAX

1-855-330-1239

1-213-294-2743

faxtoy.net
1-888-877-1655




Penny from Heaven
NEWBERY HONOR BOOK
JENNIFER L. HOLM
THREE-TIME NEWBERY HONOR-WINNING AUTHOR

I'm the brother of Diane, who is the owner of Bear. After talking to Diane this morning, I thought I'd give you an update about Bear and how he is doing. What was really worrying besides Bear being lost is that he had a major medical problem where he couldn't hold his food down because of an esophagus ailment. Bear had to sit up like we do in a special chair to even have the chance of holding his food down. After Henry's car accident, they knew that it was particularly dire when Bear ran away from the ambulance because of this ailment. The thought that Bear could survive these nine weeks we all considered a minor miracle under the circumstances. With a quick wind forward. Bear had showed up the last few nights at this 4-foot gated home in Salem, NH. Diane and the Granite rescue volunteers were preparing for an all nighter – with traps laid in and out of the fenced area. Diane had just arrived and were strategizing about whether to close the gate that Bear could leap over or let Bear get caught in the traps that he'd already alluded several times. As they were talking in walked Bear through the gate! Diane went through the gate that the rescuers secured and Bear as expected was wildly looking for a way out. At this moment Diane's better instincts took over and she commanded "sit" and Bear obediently sat long enough so Diane could secure a collared leash. And as seen in the photo about four or five other leashes followed suit from the rescuers just to make sure! Diane as instructed took Bear to the Dog Emergency Hospital. Not only was he in good shape despite losing 15 pounds, he was able to eat all the meatballs and other rescue food w o throwing it up, which at this point can not be explained even by the attending vet. Henry on the other hand almost got a ticket because of his rush to the Vet hospital but the PO gave him a major break. On Henry's arrival Bear gave his first welcome wag of his tail since his capture. All made it home safely and all is well.

8 4 6 8 1 2 9 0 4

2 7 7 6 3 1 4 8 8

5 9 7 4 1 4 6 3 3

HP Photosmart C7280 All-in-One series

Fax Test Report for
DEBBIE COX
15024502282
May 18 2010 12:55PM

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test.

The fax settings can also affect the performance of your HP device. Please check your current fax settings listed below.

Language	English
Country/Region	USA
Auto Answer	On
Rings to Answer	6
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Loud
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Fax Speed	Fast (33600)
Fax Forwarding	Off

Refer to your User Guide for more information on the fax test and settings.

Instructions on how to rerun this test:
Step 1 Press the "Setup" button
Step 2 Choose the "Tools" menu
Step 3 Choose the "Run Fax Test" item

MY83JH412204YG
VbxFN0724AR

243-9950

Test Fax
01234567890123456789012345678901234567890
Test Fax
01234567890123456789012345678901234567890
Test Fax
01234567890123456789012345678901234567890
Test Fax
01234567890123456789012345678901234567890

Recipient Information

To thd
Company thd
Fax # 2135573818

Sender Information

From arun
Company cisco
Email address arsunder@cisco.com (from 203.123.181.177)
Phone # 8554433780
Sent on Wednesday November 11 2015 at 11:42 AM EST

Hi

Test fax from Cisco

213-294-2943

Cisco

FAX TEST

עדיף מאד:
כל כפה
מבוכה

משיכת שיעורי ריבית משתנה - ריבית על שקל צמוד ל%2
- משיכה בהיקף של עד %5 מהקרן - עלות של %2 אם
- משיכה בהיקף, 0200
ישנם בהכוללים שאינו פעלו:

הרשאה לחיוב חשבון אחר,
בדיקת מסמכים לביצוע הפעולה בסניף בלבד

בכבוד רב,
שלום רב,

יעקב בנימין
מנהל אשראי
מכירות
טל: 03-90-14

This is a sample PDF document

Let's Fax it with the Interfax web service!

ABC Assessment

Name: _____

Setting _____

Date & Time	Antecedents	Behavior	Consequences

Test
I
LOVE
CATS!

	Lincoln		
Friday, March [illegible]	00 Run Thru	Tutti	Lincoln
Sat., March 9	OFF		
Sun., March 10th	**Wandel Probe**	Tutti limited rehearsal	
Mon., March 11th	7:[illegible] **Piano Tech**		
Tues., March12th	7:[illegible] **Orchestra Tech**		
Wed., March 13th	7:[illegible] **Orchestra Dress 1**		
Thurs., March 13th	7:[illegible] **Orchestra Dress 2**		
Fri., March 14th	8:00 **Performance 1**		
Sat., March 15th	8:00 **Performance 2**		
Sun., March 16th	8:00 **Performance 3**		

Counter List

10.28.2014 13:45

Serial No. A2RG113027JH

Device Name	bizhub C35		
Total	00005291	Total Duplex Counter	00000126
Paper Counter	00005190		

Copy		Total	Large Size
	Total	0000862	0000000
	Black	0000552	0000000
	Full Color	0000310	0000000
Printer		Total	Large Size
	Total	0004406	0000000
	Black	0001541	0000000
	Full Color	0002865	0000000
Color Total (Copy + Print)	Total	0005268	
	Black	0002093	
	Full Color	0003175	

Scan		Total	Large Size
	Total	0004409	0000000

Fax		Total	Large Size
	Print	0000016	0000000
	Scan	0000012	0000000
	Fax TX	00000000	
	Fax RX	00000000	

Total			00005291
Black			0002114
Full Color	Copy		0000310
	Printer		0002865

Coverage Rate	Color Coverage Rate				
		Copy	Printer	Fax	Total [%]
	Cyan	1.5	0.8	---	1.3
	Magenta	7.3	0.6	---	1.4
	Yellow	5.1	0.8	---	1.6
	Black	8.7	9.3	0.8	8.2
	Black Coverage Rate				
		Copy	Printer	Fax	Total [%]
	Black	0.8	0.1	0.8	0.1

TEST

#92

RE: CLAIM #166001
CUST # 00014843O
ATTN. BRIAN

amazon.com

[redacted]

Print this page for your records.

Order Placed: February 22, 2015
Amazon.com order number: 110-0167274-8151478
Order Total: $27.46

Shipped on February 23, 2015

Items Ordered	Price
3 of: *Intermatic EJ500 120 Volt Indoor Digital Astro In-Wall Timer, White* Sold by: Household Supply Group	$20.02

Item(s) Subtotal:	$60.06
Shipping & Handling:	$5.89
Free Shipping:	-$5.89
Total before tax:	$60.06
Sales Tax*:	$0.00
Gift Card Amount:	-$32.60
Total for This Shipment:	**$27.46**
Total paid by Gift Card:	**-$32.60**

ss:

XRNIA 92592

d

Payment Information

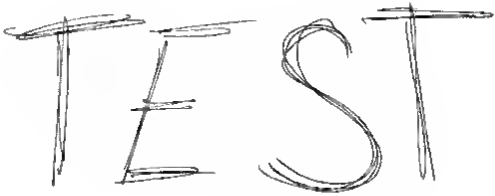
Item(s) Subtotal:	$60.06
Shipping & Handling:	$5.89
Free Shipping:	-$5.89
Total before tax:	$60.06
Estimated tax to be collected:	$0.00
Gift Card Amount:	-$32.60
Grand Total:	**$27.46**

IFORNIA 92592

To view the status of your order, return to Order Summary

Please note: This is not a VAT invoice.

Conditions of Use | Privacy Notice © 1996-2015, Amazon.com, Inc. or its affiliates


TEST

Fax.....

Date:

Subject:

To:

Organization:

Fax Number:

Phone Number:

From:

Organization:

Fax Number:

Phone Number:

Email:

Pages:

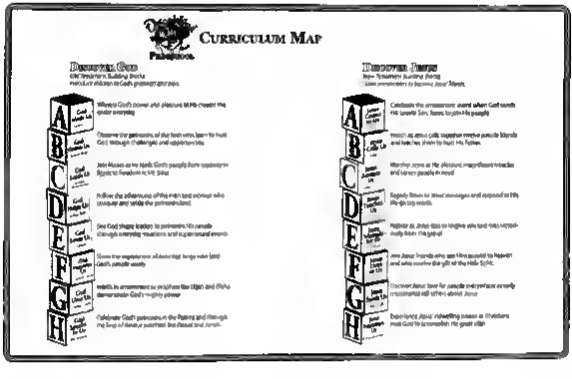
Comments:

FaxFinder

If you received this fax in error or would like to opt-out, please call _____ fax _____

or email

1


Curriculum Map
Preschool
Discovering God
Old Testament Building Blocks
Introduce children to God's promises and plan.
Where God's power and presence were created the
world everyday
Observe the patriarchs of the Bible who learn to trust
God through challenges and opportunities.
John Moses as he leads God's people from oppression
to freedom in the Sinai
Follow the adventures of the men and women who
conquer and settle the promised land.
See God shape leaders to persevere His people
through everyday situations and supernatural events.
Know the repentance of Israel's kings when they lead
God's people astray
Watch as prophets proclaim God's mighty power
Celebrate God's patience in the Psalms and rise with
the songs of devout penitence and praise and Jonah.
Discover New Testament building blocks
Learn preschoolers to become Jesus' friends.
Celebrate the announcement event when God sends
His Lovable Son, Jesus, to join His people
Watch as John calls repentant twelve people Friends
and teaches them to trust His Father.
Marvel as Jesus as He displays magnificent miracles
and serves people in need
Boldly listen to Jesus' messages and respond to His
life-giving words.
Rejoice as Jesus rises to reign as one lost man return-
ed home His beloved
Jesus Jesus' friends who are filled to Heaven
and who receive the gift of the Holy Spirit.
Discover Jesus' love for people everywhere as early
missionaries tell others about Jesus
Experience Jesus' indwelling power as Christians
must God to accomplish His great plan

TEST FAX

1

FAX

To: **Test**
Company
Fax 213-294-2943
Phone

From:
Fax 310-680-6004
Phone 678-383-2322
E-mail raymond.jackson@mnx.com

NOTES:

Doctor's Equipment
6021 Troost Ave
Kansas City, MO, 64110

To	test fax
Fax number	1 888 877 1655
From	Administrator
Fax number	816-444-6907
Business phone	816-523-6444
Home phone	
Date & Time	12/20/2012 8:39:55 AM
Pages	1
Re	test fax

test fax

RANDALL S. D JACOBS, PLLC

RANDALL S. D. JACOBS, J. D., LL.M. (CORP.)
ADMITTED IN
THE STATE OF NEW YORK
UNITED STATES DISTRICT COURTS, EASTERN DISTRICT
THE 2ND CIRCUIT COURT OF APPEALS
THE 9TH CIRCUIT COURT OF APPEALS
THE SUPREME COURT OF THE UNITED STATES

ATTORNEYS-AT-LAW
NEW YORK OFFICE
30 WALL STREET, 8TH FLOOR
NEW YORK, NEW YORK 10005
TELEPHONE: (212) 709-8626
FACSIMILE: (973) 226-3301
CONFERENCE LINE: (845) 562-6400
WWW.CHATTERJEELAW.COM

NEW JERSEY
5 HANOVER COURT
NORTH CALDWELL,
NEW JERSEY 07006-6701
TELEPHONE: (973) 226-3301
FACSIMILE: (973) 226-3307

WRITER'S DIRECT EMAIL:
rsdjacobs@chatterjeelaw.com

FACSIMILE COVER SHEET

If there is a problem with transmission or if all pages are not received, please call Randall S. D. Jacobs at (973) 226-3301 for retransmission. Number of pages including this cover page: _

TO:	Test Fax	**FAX #:**	~~18884832965~~ 18453801239
COMPANY	Hewlett-Packard		
FROM	Randall S. D. Jacobs	**DATE**	March 5, 2016

Re: Test Fax and return

This message is intended only for the use of the individual or entity to which it is addressed, and may contain information that is PRIVILEGED, CONFIDENTIAL, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone, and return the original message to us at the above address via the U.S. Postal Service. Thank you.

TEST

12-19-16

This is
Test
Please do not
Reply

Windows XP
Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP officejet 6300 series fax on JONAH.

The information below describes your printer driver and port settings.

```
Submitted Time:  1:33:37 AM 7/11/2008
Computer name:   JONAH
Printer name:    HP officejet 6300 series fax
Printer model:   HP officejet 6300 series fax
Color support:   Yes
Port name(s):    officejet6300series_copy_1
Data format:     RAW
Share name:
Location:
Comment:
Driver name:     unidrv.dll
Data file:       hpafax.gpd
Config file:     unidrvui.dll
Driver version:  4.00
Environment:     Windows NT x86
Default datatype:  RAW

Additional files used by this driver:
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpafax.ini
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzst43e.dll          (60,033,243,00)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpafax.xml
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzse43e.dtd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzuifax.dll          (60,051,222,20)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpz3r43e.dll          (60,033,243,00)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzpr43e.dll          (60-053,243,00)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpcumc32.dll          (1, 0, 2, 30)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpbcfpre.dll          (1, 0, 0, 40)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpuhf300.exp
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzsm43e.cpd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpz3m43e.gpd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzev43a.dll          (60,053,243,00)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzh143e.cab
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\stdnames.gpd
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzle43a.dll          (60,033,243,00)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpzss43a.dll          (60,053,243,00)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpfie43a.dll          (A 05 00 014)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpfiq43a.dll          (A-01-06-007)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpfrs43e.dll          (A 04 03 000)
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\unires.dll  (6.0.6000.16386
(Vista_rtm.061101.2205))
  C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\hpafax.dll

This is the end of the printer test page.
```

Fax Test

from

AGL

Test Fax from Westley

Insight.com

Sunday, August 18, 2013

Reservation Confirmation
[redacted]
Created: [redacted]
Booking Services Consultant

[redacted]

Thank you for your reservation. If you have any questions, please contact your Insight Reservation Center at 1-800-INSIGHT (1-800-467-4448) or email support@insight.com.

Insight Inc.
Reservation Center

CUSTOMER INFORMATION

Please note that Insight does not keep this guest's credit card information on file. Information will be destroyed after the reservation is fulfilled.

Reserved by:	Troy Test	Sales:	Troy
Address:	123	City, State:	[redacted]
Tel:	[redacted]	Email:	[redacted].com
Cust. Number:	developer at insight.com	Reference Number:	$ 1000000

PAYMENT INFORMATION

Credit Card:	Visa	Expiration Date:	12/20
Credit Card #:	[redacted]	Billing Zip Code:	10530

SHIPPING DETAILS

Number of Items:	2	Number of Weeks:	
Client Name:	[redacted]	Estimated Ship Date:	[redacted]

Item(s) Reserved from the Insight Warehouse in Tempe, AZ

Item Number	Image	Item Description	Quantity
[redacted]		Dell [redacted]	[redacted]
		Daily	$ 30.00

Sub-total: $ 30.00
Tax: 8.60% = $ 2.58 + Permit Fee: $ 0.00 = Total: $ 32.58

Note: Rates are subject to change. Permit Fee is $0.00 if Free.

Item(s) Reserved from the Insight Warehouse in Tempe, AZ

Item Number	Image	Item Description	Quantity
[redacted]		[redacted]	[redacted]
		Daily	$ 30.00

Sub-Total: $30.00
Tax: 8.60% = $ 2.58 + Permit Fee: $ 0.00 = Total: $ 32.58

Note: Rates are subject to change. Permit Fee is $0.00 if Free.

Special Requests: [redacted]

Thank you for using Insight.com for your reservation.

1-888-877-1655

Hi

Bob

Shirley

OSTDC\FDykes

\\CHESDIN\Oriole

Print Job Banner

Hello World!

test today

Testing Production Fax Server

To: *18032001800@tex.onnectis.com*
From: *Artem Vasilyan <artemvan@onnectis.com>*
Subject: *tt*
Date: *Mon, 21 Jan 2013 10:37:29 -0500*

R~

TEST

FAX

#1

from

Osiris

General Instructions

Purpose of Form

Form 8655 is used to authorize a reporting agent to:

- Sign and file returns,
- Make payments and payments for extra returns,
- Receive copies of notices and transcripts related to returns filed by the reporting agent, and
- Discuss tax return information with, and give oral or written information to, the third-party designee specified on Form 8655.

Authority Granted

Once Form 8655 is signed, you generally grant an effective beginning with the period indicated. However, Sec. 3504 and certain installment agreements require a power of attorney. Any power of attorney or authorization is limited to periods prior to the year(s) addressed on Form 8655.

When an authority is granted for a tax return, the authority for reporting agents also includes all tax returns in the same series that are filed on a different form (for example, Form 941-X, 941-X (PR), 944-X, 944-X (SP), or CT-2-X) and amended tax or payment vouchers. It applies to any returns or documents in the 1040 and 1120 series. It is limited to periods prior to the year(s) addressed on Form 8655. It does not authorize the reporting agent to make decisions about estimated tax payments or to make payments and accompanying bill or returns in the name of the taxpayer on Form 1040-ES, 1040-ES (NR), or 1040-ES (PR). It does not authorize the reporting agent to endorse or cash any authorized refund check.

The taxpayer authority granted with this Form 8655 is effective on the date Form 8655 is received by the taxpayer. Any authority granted on Form 8655 does not revoke a prior tax authority unless any authority granted on Form 8655 is specifically stated. Third-party designee's address authority.

Where To File

Mail Form 8655 to:

Internal Revenue Service
Accounts Management Practice Center
MS # 6-H-100 Stop
1973 North Rulon White Blvd.
Ogden, UT 84404

You may fax Form 8655 to (844) 545-4175. The number is 801-620-4102.

Additional Information

Additional information about powers of attorney, appointees, and other matters can be found in:

- Pub. 947, Practice before the IRS and Power of Attorney,
- Circular 230, Regulations Governing Practice before the Internal Revenue Service, and
- Rev. Proc. 2012-8, 2012-1 I.R.B. 239, available at www.irs.gov.

Publication 947 and Circular 230 are available at your local IRS office.

Substitute Form 8655

You may be required to file a substitute form for a Form 8655, see Pub. 1167, General Rules and Specifications for Substitute Forms and Schedules. If you are to file a Form 8655, a substitute Form 8655 that is approved by the IRS may be used. However, the format of the substitute Form 8655 must conform to the Form 8655 and be approved by the IRS prior to use. Do not change the wording of the Form 8655 unless specifically directed.

Revoking an Authorization

To revoke a tax or Form 8655 or file with the IRS, the filer of a power of attorney must send a statement to the IRS that includes the taxpayer's name, address, and identifying number (social security number for individuals, employer identification number for businesses, or individual taxpayer identification number for those who have applied for one) and the following statement: "The power of attorney granted to [name of representative] on [date of power of attorney] is revoked."

The taxpayer must personally sign the revocation. If more than one taxpayer executed the power of attorney, all must sign the revocation. The taxpayer must send a copy of the revocation to each representative who is to be notified of the revocation. The taxpayer may use Form 8655 to revoke a power of attorney. However, Form 8655 will not revoke a prior power of attorney unless specifically stated.

Withdrawal. A representative may withdraw from representing a taxpayer by sending a written notice to the IRS office where the power of attorney was sent. The representative must provide the taxpayer's name, address, and identifying number as well as the tax form, year or period, and IRS office where the power of attorney was sent. For more information, see Pub. 947.

Specific Instructions

Line 1a

Use the "Form" format if you are filing one Form 8655 for multiple tax periods. Use the "Tax Year" format if you are filing one Form 8655 for multiple tax periods for the same tax year. For example, write "1040" on the form for 2017 to authorize you to represent the taxpayer's tax return for the year of the Form 8655 for the 2016, 2017, and 2018 tax years.

Line 4b

Use the "Name" format if you are filing one Form 8655 for multiple tax periods. Use the "Tax Year" format if you are filing one Form 8655 for multiple tax periods for the same tax year. For example, write "1040" on the form for 2017 to authorize you to represent the taxpayer's tax return for the year of the Form 8655 for the 2016, 2017, and 2018 tax years.

Who Must Sign

Sole proprietorship. The individual owning the business.

Partnership including not a limited liability company (LLC) member or manager/member. Generally, Form 8655 can be signed by any person who has the authority to bind the partnership. Limited liability partnership authority is not sufficient. A power of attorney document by the board of directors or other governing body. Every officer or employee who can be designated by any partnership, corporation, and any other person authorized to execute a power of attorney must execute Form 2848.

Partnership including not a limited liability company (LLC) member or manager/member. Generally, Form 8655 can be signed by any person who has the authority to bind the partnership. Limited liability partnership authority is not sufficient. A power of attorney document by the board of directors or other governing body. Every officer or employee who can be designated by any partnership, corporation, and any other person authorized to execute a power of attorney must execute Form 2848.

Corporation or association. All members of a corporation or association must be represented. Generally, Form 8655 can be signed by any person who has the authority to bind the corporation. Limited liability partnership authority is not sufficient. A power of attorney document by the board of directors or other governing body. Every officer or employee who can be designated by any partnership, corporation, and any other person authorized to execute a power of attorney must execute Form 2848.

Single member LLC classified as a disregarded entity. The owner of the LLC.

Trust or estate. The fiduciary.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Section 6109 requires you to provide your identifying number. Section 6103 allows the IRS to disclose or give the information on this form to others as described in the Code. For example, we may disclose your tax information to the Department of Justice, to enforce tax laws, both civil and criminal, and to cities, states, and the District of Columbia to carry out their tax laws. We may disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for individual taxpayers filing this form is approved under OMB control number 1545-0150 and is included in the estimates shown in the instructions for their individual income tax return. The estimated burden for all other taxpayers who file this form is shown below.

Recordkeeping	Learning about the law or the form	Preparing and sending the form to the IRS
46 min.	10 min.	20 min.

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Internal Revenue Service, Tax Forms and Publications, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. Do not send this form to this address. Instead, see Where To File above.

"I know the Auditor needs it, but it's not in the file!"

- *Reduce staff time shuffling paper*
- *Improve client services and reduce overhead*
- *Protect and secure vital records*
- *Locate client files quickly and easily*
- *Help with new compliance regulations*

Going Paperless With CEO...we provide cost effective and powerful solutions for Financial Services Providers including financial Planners, Bankers, Brokers, and Mortgage lenders

CEO Image Systems a full service provider of state of the art scanning and electronic document management software that enables your company with powerful tools to organize, store, and retrieve documents and records. CEO also provides outstanding consultation, training, and help desk/technical support, and sells and provides service for Canon, Fujitsu, Kodak, and Panasonic brand scanners

CEO Image Systems, Inc
340 N. Main Street, Suite 203 Plymouth, MI 48170
800.523.1066 sales@ceoimage.com
www.ceoimage.com

CEO image systems

To

Free Virtual Office News Sample Newsletter

Simply logon to *www.ceoimage.com/financial.htm* and register for your free Virtual Office News newsletter. The *Virtual Office News* monthly newsletter from David Drucker and Joel Bruckenstein brings you the latest on virtual office tools and technology. Features guest columnists and brings you a periodic "Price Watch" to tell you where to find the best prices.

Windows XP
Page de test d'imprimante

Félicitations !

First Name:	Test	Last Name:	Test
Home Email:		Date:	09/11/
		Pat	$ 40.50

Subtotal: $40.50
Grand Total: $43.[illegible] Credit Card: [illegible]

Note: Receipt Not Valid For

Special Request/Log:

yay
Fax

This is a test fax sent by GFI FAXmaker.

TEST[illegible]
[illegible] **ET!**

FAX

TO:	FaxToy	FROM	Test
FAX:	8553301239	PHONE #:	
SUBJECT:	Test Fax	DATE:	[illegible]

NO. PAGES: 1

COMMENTS:

TEST
TAX

PATIENT NAME: _____ DOI: _____

TX DATE: _____ THERAPIST: _____

S

O

A

P

97010 HYDRO HOT/COLD
97112 NMT RE-EDUCATIO
97140 MFR/MET/TPTS
97124 MASSAGE THERAPY
97140 MANUAL THERAPY
97780 ACUPUNCTURE
97014 ELECTICAL STIM
97026 INFRARED LAMP
97035 ULTRASOUND
97016 CUPPING

97139 MISC _____

A Healing Arts Tampa FL

TX DATE: _____ THERAPIST: _____

S

O

A

P

97010 HYDRO HOT/COLD
97112 NMT RE-EDUCATIC
97140 MFR/MET/TPTS
97124 MASSAGE THERAP
97140 MANUAL THERAPY
97780 ACUPUNCTURE
97014 ELECTICAL STIM
97026 INFRARED LAMP
97035 ULTRASOUND
97016 CUPPING

97139 MISC _____

TX DATE: _____ THERAPIST: _____

S

O

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P

97010 HYDRO HOT/COLI
97112 NMT RE-EDUCATI
97140 MFR/MET/TPTS
97124 MASSAGE THERAI
97140 MANUAL THERAP
97780 ACUPUNCTURE
97014 ELECTICAL STIM
97026 INFRARED LAMP
97035 ULTRASOUND
97016 CUPPING

97139 MISC _____

Test

DUMMY FAX DOCUMENT

NO CONTENT HERE

WHO ARE WE? We are **Trailblazers,** Star Reachers, Bridge Builders. We are Life Changers, the Original TRANSFORMERS. We are Leaders, **Teammates** Soulmates. We are Doctors, Lawyers, Swim Coaches, Professors and Hockey Players. Locked arm in arm. Connected at the ♥. We are FAMILY. Mothers, Daughters, Fathers and Sons. We are **Friends.** We are Arbonne. We are **Earth** Lovers and Protectors. We are **Green.** And GROWING. And big on Botanicals. We are **Pure,** Safe and Beneficial. Always have been. Always will be. We are Worldwide. World Class. We're for **Simple,** Elegant and Vibrant. We're for **Freedom.** From radicals, gluten, the 9 to 5. We're for HEALTHY! Happy and **Natural** Champions of **Wellness.** We're for generosity. Giving big and giving back. We're Forward-thinking. Forward-looking **Future** friendly. We believe in FORTUNITY and Optimism. And Awesome. We are Warriors who work hard **Dreamers** who dream big. We are owners of our own lives. We are Positive WE! Unstoppable. We are pure. Through and through. Inside and out. Pure Energy. Pure products. Pure **hearts** ARBONNE.

TOP FLIGHT

STANDARDS

1 SUBJECT

COLLEGE RULE

70

Sheets

Made in USA

1957

C

New Greece China
RESTAURANT
CHINESE FOOD TO TAKE OUT

We Deliver
(Minimum $10.00)
(Varies by Distance)

OPEN 7 DAYS A WEEK
Mon - Thurs. 10:30 am 10:00 pm
Friday 10:30 am- 11:00 pm
Saturday 11:00 am 11:00 pm
Sunday 12:00 noon 10:00 pm

2538 Ridgeway Ave. Rochester, NY, 14626

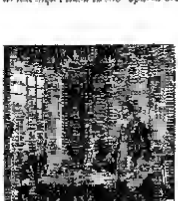
Tel.: (585) 697-0351
225-9130

Fax.: (585) 225-5994

COUPON
For purchase of $ 20 or up
FREE
SWEET BAKERY OR TWO EGG ROLLS
Cannot Combine Coupon. Must present coupon at the time of purchase

COUPON
For purchase of $30 or up
FREE
SESAME CHICKEN OR 2 LITER SODA
Cannot Combine Coupon. Must present coupon at the time of purchase

TEST #5A



Test FAX

From Glenn Gephart – Metaswitch

Calling 818-442 4169
Second call to 818-449-3714
Third call to 858-449 3721
Fourth call to 813 449 7761

The unanimous Declaration of the thirteen united States of America

When in the Course of human events, it becomes necessary for one people to dissolve the political bands which have connected them with another, and to assume among the powers of the earth, the separate and equal station to which the Laws of Nature and of Nature's God entitle them, a decent respect to the opinions of mankind requires that they should declare the causes which impel them to the separation.

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

[illegible]

Cancellation Reason (optional)

Thanks for submitting IN Skylight, check us your questionnaire

HP Officejet J6400 All-in-One series

Fax Test Report for
Bill Kelner
1-651-633-1507
Jun 25 2008 7:50AM

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test.

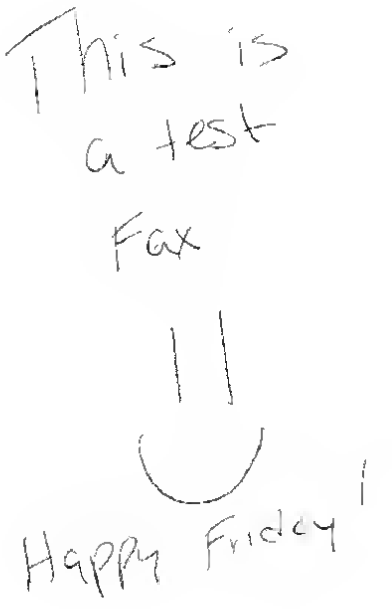
The fax settings can also affect the performance of your HP device. Please check your current fax settings listed below.

Language	English
Country/Region	USA
Auto Answer	On
Rings to Answer	2
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Fax Speed	Fast (33600)
Fax Forwarding	Off

Refer to your User Guide for more information on the fax test and settings.

Instructions on how to rerun this test:
Step 1. Press the "Setup" button
Step 2. Choose the "Tools" menu
Step 3. Choose the "Run Fax Test" item

MY83425W3056F
BHM1FN0749AR


This is
a test
Fax
Happy Friday!

TEST FAX

Contenu

Installation sur un réseau sans fil 5

Recherche d'informations supplémentaires sur l'imprimante 5

Informations requises pour configurer l'imprimante sur un réseau sans fil 5

Installation de l'imprimante sur un réseau sans fil 5

Qu'est-ce que Wi-Fi Protected Setup ? 6

Configuration de l'imprimante sans fil à l'aide WPS (Wi-Fi Protected Setup) 7

Installation de l'imprimante sur d'autres ordinateurs 7

Interprétation des couleurs du voyant Wi-Fi 8

Instructions spéciales relatives à l'installation sans fil 8

Gestion du réseau Ethernet 9

Informations requises pour configurer l'imprimante sur un réseau Ethernet 9

Installation de l'imprimante sur un réseau Ethernet 9

Dépannage 10

Liste de vérification du dépannage relatif au réseau 10

Recherche d'adresses IP 10

Dépannage relatif à l'installation sans fil 11

Notices 16

Avis sur l'édition 16

Glossaire de la mise en réseau 17

EEMVG

New Expensive shoes! Now, what other mischief can I get into with my BF's credit card?
Mmm... I love shoes, especially expensive ones!

APRIL 2010 =
Demnächst im Kino

This is a test .

2

Configuration Page

07/26/2017 08:58

Serial No. A22801100910

TC: 00016736

Default Paper

- Paper Size: 8 1/2 x 11
- Custom Size
  - Width: 0.000 inches
  - Length: 11.007 inches
- Default Tray: Tray 1
- Paper Type: Plain Paper
- Binding Position: Left Side
- Duplex: OFF
- Destination: Portrait
- Copies: 1
- Collate: OFF
- Offset/Staple: None
- Auto Tray Switching: ON
- Manual Print: OFF
- THF Image Paper Setting: Priority Paper Size
- Measurement Unit Setting: Inch
- Host Job Timeout: Disable
- Stamp Page Setting: OFF
- Auto Continue: OFF
- Tray Mapping Mode: OFF
  - Logical Tray 0: Physical Tray 1
  - Logical Tray 1: Physical Tray 1
  - Logical Tray 2: Printing Tray 1
  - Logical Tray 0: Printing Tray 1
  - Logical Tray 0: Printing Tray 1
  - Logical Tray 0: Printing Tray 1
  - Logical Tray 0: Physical Tray 1
  - Logical Tray 7: Physical Tray 1
  - Logical Tray 0: Physical Tray 1
  - Logical Tray 0: Physical Tray 1

System Setting

- Language: English
- Grayscale Page: Auto
- Sleep Time Setting: 240min
- LCD Contrast: 0
- Enable Warning
  - Paper Empty
    - Manual Feed: OFF
    - Tray 1: ON
    - Tray 2: ON
    - Tray 3: ON
- DOX/XML Print Settings
  - DOX/XML Print Mode: Speed Mode
  - Print Sheet/Book: Current Mode
  - Paper Size: Auto
  - Paper Type: Auto

- Layout Combination
  - Layout Settings: OFF
  - How: 1
  - Column: 2
  - Combination Shadow: Horizontal
  - Combination Direction: Top Left to Bottom Right
- Page Gutterway
  - Row Interval: 0
  - Column Length: 0
- Margin
  - Top Margin: 0
  - Bottom Margin: 0
  - Left Margin: 0
  - Right Margin: 0
- Page Zoom: Auto
- Page Frame: OFF

Quality Settings

- Color Mode: Color Mode
- Brightness: 0%
- Halftone
  - Image Printing: Detail
  - Text Printing: Line Art
  - Graphics Printing: Detail
- Edge Enhancement
  - Image Printing: OFF
  - Text Printing: ON
  - Graphics Printing: ON
- Edge Strength: Middle
- Economy Print: OFF
- PCL Settings
  - Contrast: 0 %
  - Image Printing
    - RGB Source: sRGB
    - RGB Intent: Photographic
    - RGB Gray
      - Bk=K Gray=K
  - Text Printing
    - RGB Source: sRGB
    - RGB Intent: Vivid
    - RGB Gray
      - Bk=K Gray=K
  - Graphics Printing
    - RGB Source: sRGB
    - RGB Intent: Vivid
    - RGB Gray
      - Bk=K Grey=K
- PS Settings
  - Image Printing
    - RGB Source: sRGB
    - RGB Intent: Photographic
    - RGB Gray
      - Bk=K Gray=K
    - Destination Profile: Auto
  - Text Printing
    - RGB Source: OFF 0
    - RGB Intent: Vivid
    - RGB Gray
      - Bk=0 Gray=K
    - Destination Profile: Auto
  - Graphics Printing
    - RGB Source: OFF 0
    - RGB Intent: Vivid
    - RGB Gray
      - Bk=0 Grey=K
    - Destination Profile: Auto
  - Simulation
    - Simulation Profile: None
    - Sim. Intent: Shadow Color
    - CMYK Gray
      - Bk=(CMYK Gray=CMYK
- Gradation Adjustment
  - Tone Calibration: ON
  - CMYK Density
    - Cyan
      - Highlight: 0
      - Middle: 0
      - Shadow: 0
    - Gutterway
      - Highlight: 0
      - Middle: 0
      - Shadow: 0
    - Yellow
      - Highlight: 0
      - Middle: 0
      - Shadow: 0
    - Black
      - Highlight: 0
      - Middle: 0
      - Shadow: 0
  - Color Separation: OFF

Emulation

- Duplex Installed: Auto
- PS
  - Wait Timeout: 0 seconds
  - Print PS Errors: OFF
  - PS Protocol: Auto
  - Auto Trapping: OFF
  - Name Unscripted: OFF
- PCL
  - CR/LF Mapping: OFF
  - Line/Page: 60
  - Font Setting
    - Font Priority: 0
    - Point Size: 10.00
    - Symbol Set: PC8
    - Set Code Font Settings
      - Line Width: 0
      - Space Width: 0
- XPS/OOXML
  - Digital Signature: OFF
  - Print XPS/OOXML Errors: Print

Installed

- HDD: Installed
- Memory: 1024 MB
- Tray 2: Installed
- Tray 3: Installed
- Fax Kit: Installed
- Bluetooth: Installed
- Wireless LAN: Uninstalled

Printer Information

- Installed Tray
  - Manual Feed
    - Paper Size: 8 1/2 x 11
    - Paper Type: Plain Paper
  - Tray 1
    - Paper Size: 8 1/2 x 11
    - Paper Type: Plain Paper
  - Tray 2
    - Paper Size: 8 1/2 x 11
    - Paper Type: Plain Paper
  - Tray 0
    - Paper Size: 8 1/2 x 11
    - Paper Type: Plain Paper

Firmware Version

- Controller F/W: A2GN3000000 GFF
- Engine F/W: A72GY00AA00000000
- Boot F/W: A2GN3000100-000
- Panel F/W: A2GN3000103-GFF
- Fax F/W: A2GN4010000-000
- Shadow F/W: A2GN3000103-000
- Printing F/W: A2GN3000210000000

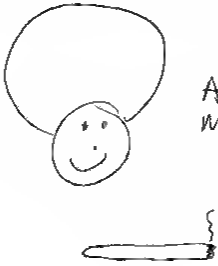
Network

- NW Installed: 00:20:6B:E2:98:88
- TCP/IP
  - Source: Off
  - IP Installed: 10.12.67.64
  - Source Mask: 255.255.255.128
  - Gateway: 10.12.67.1
  - RAW Port 0: 9100

External Memory Print

- File Type: PDF, XPS, JPEG, TIFF

I was gonna fix the fax but then I got high



TEST 2

3368

AK

[illegible]
Toll Free: [illegible]
Fax: [illegible]

VANTAGE POINT
LABORATORIES

[illegible]
[illegible]

Patient Name:	TEST TEST	Ordering Physician:	Patient, Public
D.O.B. & Gender:	[illegible]	Ordering Facility:	[illegible]
Collection Date:	00/00/2015	Referring Physician:	N/A
Received Date:	[illegible]	Account Number:	[illegible]
Report Date:	00/00/2015	VantagePoint ID #:	[illegible]
Specimen Type:	[illegible]	VantagePoint Case #:	[illegible]
Specimen ID:	N/A	Medical Record #:	N/A

Quantitative JAK2 V617F Mutation Analysis by PCR

Interpretive:
[illegible]

[illegible]

HR-B
TEST

Test

>10 545 0990

Fax

HP 4315r

TEST

From: Homedepot

store #2412

Prodesk FAX: (207) 8937201

Remember me next time

HP Color LaserJet *CM2320nf MFP*

Fax Confirmation Report

HP LASERJET FAX
212 962-3715
JUL-15 2011 4 09PM

Job	Date	Time	Type	Identification	Duration	Pages	Result
2910	7/15/2011	4 59 08PM	Send	3014565636	0 07	0	Stop

HP Color LaserJet CM2320nf MFP

Junk Fax List

HP LASERJET FAX
212 962-3715
JUL-15 2011 5:00PM

Job Type Identification Pages Start Time Duration Result

No numbers have been blocked.

+18553301239

Are you working?

TEST

****
*** ERROR TX REPORT ***
****

INCOMPLETE TRANSMISSION

TX/RX NO.	0004 COLOR TRANSMISSION
DESTINATION NUMBER	*#218884732965
DESTINATION ID	
ST. TIME	01/01 00 02
COMMUNICATION TIME	00 10
PAGES SENT	0
RESULT	NO #085
	TRY AGAIN IN BLACK & WHITE

COLOR TRANSMISSION IMAGES ARE NOT PRINTED ON TRANSMISSION REPORT

ELECTION RESULTS EDITION

THE PEOPLE SPEAK

President

Usually politicians say "Thanks for giving me the chance to do this for all of us." I think I should say "Maybe I shouldn't have volunteered to do all of that stuff—you went and made me president!"

All jokingly aside, I want to say that I look forward to the upcoming year with all of you. We have one of the best brew clubs around with a large, active base, a number of committed individuals (with those who should be committed), and a lot of fun activities

Turnthrough takes some work. We do a lot in a year and I'm already hearing about some of the events that people are getting excited about such as

Parties

- Lounge Lizard Slather
- Anniversary Party
- Mayfest
- Club Picnic
- Pub Crawl
- Cider Picnic

Competitions

- NHC '97
- AHA Club-only

President's Letter page 2

Tim Pool

CNN picked a fight with the internet This is not a fight they can win

78 185

KAISER PERMANENTE®

Kaiser Foundation Hospitals
Permanente Medical Group

PAQUETE DE REGISTRO DE NACIMIENTO

POR FAVOR COMPLETE LO MAS POSIBLE

A todas las parejas que no estan casadas y desean que la información y nombre del padre sean incluidos en el registro de nacimiento del recién nacido, favor de asegurarse que el padre esté en el hospital para firmar un formulario de Declaración de Paternidad durante su estancia en el hospital. Ningun tipo de arreglo se puede hacer con cualquier otro miembro del personal.

Si el padre no está disponible durante el tiempo de hospitalización, la pareja no casada tendrá que ir a una agencia externa en busca de asistencia. Para más información, por favor llame al Estado de California al 1(866) 249-0771.

Muchas gracias.

????? ??? ??????? ????? ?? ?????? ????????? Dynamics CRM
??????? ?? Microsoft Dynamics CRM ????? ???????? ????????? ?????? ????? ???????? ????? ?????????
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???????? ??????? ????? ????? ?????? ?????. ??? ????? ???????? ????????
??????? ??????? ??????????, ????????? ???????? ?? Intec?

Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your EPSON WorkForce 840 Series on TAMARA-PC

The information below describes your printer driver and port settings.

```
Submitted Time:  10/40/21 PM 4/23/2012
Computer name:   TAMARA-PC
Printer name:    EPSON WorkForce 840 Series (Copy 2)
Printer model:   EPSON WorkForce 840 Series
Color support:   Yes
Port name(s):    192.168.1.97
Data format:     RAW
Share name:      EPSON WorkForce 640 Series (Copy 2)
Location:
Comment:
Driver name:     E_IMAIGMA.DLL
Data file:       E_IVIFGMA.VIF
Config file:     E_IUICGMA.DLL
Help file:       E_FHLDRGMA.CHM
Driver version:  5.16
Environment:     Windows x64
Monitor:         EPSON WorkForce 840 Series 64Monitor4A

Additional files used by this driver:
C:\windows\system32\spool\DRIVERS\x64\3\E_IDSPGMA.DLL    (0  3  1. 55)
C:\windows\system32\spool\DRIVERS\x64\3\E_I3RCGMA.DLL    (0 1 1 10)
C:\windows\system32\spool\DRIVERS\x64\3\E_ICONGMA.DLL    (4 2 46 0)
C:\windows\system32\spool\DRIVERS\x64\3\E_IAUDGMA.DLL    (0  1  2  3)
C:\windows\system32\spool\DRIVERS\x64\3\E_IE8RGMA.DLL    (1  0  0  10)
C:\windows\system32\spool\DRIVERS\x64\3\E_IREOGMA.DLL    (0  3  1 2)
C:\windows\system32\spool\DRIVERS\x64\3\E_GATO4F.EXE     (1 0 2 0)
C:\windows\system32\spool\DRIVERS\x64\3\E_IUIXGMA.DLL    (0 8 0 24)
C:\windows\system32\spool\DRIVERS\x64\3\E_IUI1GMA.DLL    (0 8 0 21)
C:\windows\system32\spool\DRIVERS\x64\3\E_IUIXGMA.DLL    (0 8 1 15)
C:\windows\system32\spool\DRIVERS\x64\3\E_FUIXGMA.XML
C:\windows\system32\spool\DRIVERS\x64\3\E_FCF0GMA.CFG
C:\windows\system32\spool\DRIVERS\x64\3\E_FCF0GMA.DEV
C:\windows\system32\spool\DRIVERS\x64\3\E_IGPCGMA.DLL    (3 0 7)
C:\windows\system32\spool\DRIVERS\x64\3\E_IPRUGMA.DLL    (0 4 0 12)
C:\windows\system32\spool\DRIVERS\x64\3\E_IPREGMA.EXE    (0 1 0 13)
C:\windows\system32\spool\DRIVERS\x64\3\E_FPIIGMA.DAT
C:\windows\system32\spool\DRIVERS\x64\3\E_IIMWGMA.DLL    (1  0  1  10)
C:\windows\system32\spool\DRIVERS\x64\3\E_ILC1GMA-LMC
C:\windows\system32\spool\DRIVERS\x64\3\E_ILC2GMA_LMC
C:\windows\system32\spool\DRIVERS\x64\3\EPSET32.DLL      (3 0 0 17)
C:\windows\system32\spool\DRIVERS\x64\3\EPSET64.DLL      (2 0 0 1)
C:\windows\system32\spool\DRIVERS\x64\3\E_IHNOGMA.DLL    (5 3 0 2)
C:\windows\system32\spool\DRIVERS\x64\3\E_IMWOGMA.DLL    (4 0 0)
C:\windows\system32\spool\DRIVERS\x64\3\E_IHTOGMA.DLL    (1 0 0)
C:\windows\system32\spool\DRIVERS\x64\3\E_ISROGMA.DLL    (5 1 0)
C:\windows\system32\spool\DRIVERS\x64\3\E_IHBRGMA-DLL    (1 0 1 built b   winOOK)
C:\windows\system32\spool\DRIVERS\x64\3\E_IHUTGMA.DLL    (11 0 2 built    WinDDK)
C:\windows\system32\spool\DRIVERS\x64\3\E_IHUTGMA.EXE    (11 0 2 built    WinDDK)
C:\windows\system32\spool\DRIVERS\x64\3\E_IHSPGMA.DLL    (1 0 1 built b   WinDOK)
C:\windows\system32\spool\DRIVERS\x64\3\E_FBA8GMA-DLL    (6  3  0  0)
```

ZyWALL USG100-PLUS

Unified Security Gateway

User's Guide

Default Login Details

LAN IP Address	https://192.168.1.1
User Name	admin
Password	1234

Version 3.00
Edition 2, 9/2012

ZyXEL

www.zyxel.com

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ZyXEL Communications Corporation

Business Casual Dress Code

JC Restoration Inc 's objective in establishing a business casual dress code is to allow our employees to work comfortably in the workplace. Yet, we still need our employees to project a professional image for our customers, potential employees and community visitors. Business casual dress is the standard for the dress code. Because of casual clothing is not suitable for the office, these guidelines will help you determine what is appropriate to wear to work. Clothing that works well for the beach, yard work, dance clubs, exercise sessions, and sports contests may not be appropriate for a professional appearance at work.

Clothing that reveals too much cleavage, your back, your chest, your feet, your stomach or your underwear is not appropriate for a place of business, even in a business casual setting.

Even in a business casual work environment, clothing should be pressed and never wrinkled. Torn, dirty, or frayed clothing is unacceptable. All seams must be finished. Any clothing that has words, terms, or pictures that may be offensive to other employees is unacceptable. Clothing that has the company logo is encouraged. Clothing with fashion brand names such as Polo, Lacoste, Ralph Lauren, etc. is acceptable. Sports teams, university wording such as "Porsche" named "events" such as golf and charity outings, etc. is not acceptable.

Fridays will be declared dress down days. On these days jeans and other more casual clothing although never clothing potentially offensive to others, are allowed. Conservative athletic shoes are allowed on Fridays.

Guide to Business Casual Dressing for Work

No dress code can cover all contingencies so employees must exert a certain amount of judgment in their choice of clothing to wear to work. If you experience uncertainty about acceptable, professional business casual attire for work, please ask your supervisor.

the Pizza Loft

Starters

Bread Twists...
Cheese $4.25
Add a meat $1.00
Add a vegetable $ .50

Garlic Bread... $3.00
Garlic Bread w/cheese... $3.50
Soup of the Day... $3.75

Pizza

Regular 8" $6.50 **Large 16" $11.75**

Meat Toppings... Regular $1.00 Large $1.75
Pepperoni, sausage, bacon, chicken

Veggie Toppings... Regular $.50 Large $1.00
Banana peppers, black olives, green peppers, mushrooms, onions, spinach, tomatoes

Extra Cheese... Regular $ 1.25 Large $ 2.50

White Pizza... Regular $ 8.75 Large $12.50
Cheese, tomatoes, garlic...olive oil and ricotta cheese

Salads

Little Salad...
Lettuce, tomato, cucumber, onion, & cheese $3.75

Big Salad...
Same as the little salad but big $6.50

Chicken Salad
your choice of grilled, breaded, BBQ or Buffalo on a Big Salad $8.50

Little Caesar Salad...
Romaine lettuce, croutons & traditional Caesar dressing with sprinkle of Parmesan $4.00

Big Caesar Salad...
Same as the little Caesar salad but Big $6.75

Chicken Caesar Salad...
Grilled Chicken on a Big Caesar Salad $8.75

Dressings: Oil & vinegar, French, Italian, Ranch, Caesar, Balsamic Vinegarette

Drinks

Coke products...
Coke, Diet Coke, Sprite, Barq's Root Beer, Mello Yello, and Nestea Iced Tea

Glass... $1.95
Pitchers... $5.50

2 Liters, Glacier Water
Lemonade and Minute Maid
Energy drinks also available

Sandwiches

Hoagies on fresh Mancini's bread... 8" half or 12" whole

Italian...
Ham, capicolla, salami, cheese, with lettuce, tomato, onion and oil & vinegar Half $5.85 Whole $8.75

Steak...
Steak, cheese, onions and peppers with lettuce, tomato and your choice of dressing or mayo Half $5.50 Whole $8.25

Chicken...
Chicken breast breaded, grilled, BBQ, Buffalo or Caesar with cheese, lettuce, tomato and your choice of dressing or mayo Half $5.15 Whole $8.50

Veggie...
Your choice of veggies grilled with cheese, lettuce, tomato, onion and your choice of dressing or mayo Half $4.25 Whole $7.50

"All sandwiches also available as a wrap."

Call for delivery, pick up, or enjoy in our dining room!
(412) 788-6200

EL TROPICAL
CUBAN RESTAURANT & LOUNGE
FULL LIQUOR BAR
THE REAL CUBAN TASTE
IN THE CAPE
108 MANCOCK BRIDGE PARKWAY N.
THURSDAY
LADIES NIGHT
TROPIQUINIS
1st HOUR
FREE
7 pm - 8 pm
BREAKFAST
SPECIAL
$2.49
Mon. - Fri.
2 for 1
Mojito
Mon. - Fri.
LUNCH SPECIAL
1 Meat
& 2 Sides
$4.99
1/2
PRICE
1/2 PRICE DINNER SPECIAL

TRANSMISSION VERIFICATION REPORT

TIME 06/04/2013 12:34
NAME BCU 1T
FAX 8479328478
TEL 8479328478
SER.# BROF43644897

DATE,TIME	06/04 12:34
FAX NO./NAME	18479328634
DURATION	00:00:00
PAGE(S)	00
RESULT	BUSY
MODE	STANDARD

BUSY BUSY/NO RESPONSE

Baxter Credit Union Information Systems

Underfunded Checking Project	Version Number 0.01
Project Requirements	Date 6/5/2013

HP LaserJet Pro MFP M127fw

Fax Self Test

Jan 7, 2013 7:07:1[illegible]

The fax [illegible] active [illegible]	Pass
Phone cord [illegible] connected to correct Port on Fax	Pass
Telephone line current test	Pass
Dial tone detection	Pass

Your HP device has passed the fax test.

The fax settings can also affect the performance of the device.
Please verify the following fax settings are correct:

Detect Dial Tone	[illegible]
Daylight Savings	[illegible]
Date & Time	[illegible]
Dialing Mode	= Tone
Distinctive Ring	= [illegible]
Fax Header	[illegible]
Header Fax Number	= [illegible]
Rate Profile	[illegible]
Redial Interval	= [illegible]
Answer Mode	= [illegible]
Answer Ring Pattern	[illegible]
Answer Ring Type	= [illegible]
Extension Phone	On
Junk Fax Mode	[illegible]
Pulse Dial Rate	[illegible]
Store Received Faxes	Off
Error Policy	= [illegible]
Black Level	= [illegible]
Resolution	[illegible]
Scan Size	= [illegible]
Automatic Reduction	[illegible]
Fax Speed	= [illegible]
Forward Fax Mode	= [illegible]
Fax Activity Log	[illegible]
Ring Volume	= Medium
Reprint Faxes	[illegible]
Fax Cover Sheet	[illegible]
Fax Error Policy	[illegible]
Answer Ring Type	= [illegible]
Answer Ring Pattern	[illegible]
Auto Log Print	= [illegible]
Fax Forwarding	= [illegible]

Instructions on how to [illegible] the test:
Step 1. Press the arrow buttons to enter the menus.
Step 2. Choose the [illegible] menu.
Step 3. Choose the Run Fax Test item.

Royale
Ultra
3
PLY/ÉPAISSEURS
72 FACIAL TISSUES

THIS IS THE TEST PAGE

THIS IS THE TEST PAGE

THIS IS THE TEST PAGE

test

Price: $156,000
Sq ft 1994
Proposed Rent: $1,672.26 month, $1,582,000/year

Customer Choice Options

Granite Tops in Kitchen	**$5,600 (allowance)**
Hardwood Flooring	$11.00/sq ft (allowance)
Ceramic Flooring	$12.00/sq ft (allowance)
Feature Paint Wall	$150 extra per wall
Crown Moulding	$600.00
Upgrade to Stainless Steel Appliances (incl. Microwave Space saver, not R/D)	$1,500
Garage Door Opener	$500.00 (Perry)
Keyless Entry	**$50.00**
Programmable Thermostat	**$150.00 (Perry)**
Finish Texture (vaulted & drywall paint ready)	$ .50

Upgrade pot lights in vaulted areas and fan in the master bathroom

187

Day 1 of 365

Untitled

Usu quod vivendum ei. Ea nec dicta perpetua indoctum, numquam accusam iracundia et vim, vel id dico pecentium. Vix soluta dolorem adhorreant et, consequat voluptatibus cu sea, mucius graeco labores sed at. Vel cu modo conclusionemque, qui neque sensibus id.

In qui wisi veri aperiri. Ei ipsum facete animal qui. Qui ex dolemit assueverit. Stet soluta at mea, justo liberavisse te usu.

Liber luptatum lucilius in pro, mei porro inermis eu. Eum ex invidunt antiopam, eius urbanitas pertinacia has ut. Labore signiferumque eam ut, sit tissque virtute cu. Homero voluptaria nec te, in porro animal placerat qui, erat comprehensam no sed, ut duo [illegible]

This Will Test

My Fax Setup

July 22, 2010

DPS		
Combined*	23609.56	100.00%
Normal	20893.57	87.75%
Pet:	2915.99	12.26%
Previous:	7367.65	+137.34%

Stat	DPS	Per Budget
Ranged Speed - 0.1	65.854	N/A
Ranged DPS - 1	6.185	N/A
Haste Rating + 1	3.726	3.726

Note: Different downshifts at haste will vary significantly in value due to shot clipping.

Agility + 1	2.684	2.684
Hit + 1 (when below cap)	2.268	2.268
Crit Rating + 1	1.53	1.53
Mastery Rating + 1	0.984	0.984
Attack Power + 1	0.585	0.585

Gear Comparison

You are over the hit cap but hit values are *enabled* in these gear comparisons. Be sure to disable them when comparing gear that won't drop you below the hit cap.

- Custom HunterSpot.com Gear Ranking
- Custom LustPanda.com Gear Ranking
- Custom Wowhead.com Gear Ranking
- Outputs With Hit Rating
- Export Stat Weights to WoW Rankings

Pawn String

(Pawn v1: Hunter:BM:Analyzer: Agility=2.684, RedSocket=128.2, YellowSocket=149.84, BlueSocket=74.52, MetaSocket=200.053, RangedDps=6.185, RangedSpeed=858.54, HitRating=2.24, MasteryRating=0.984, CritRating=1.53, HasteRating=3.726, Ap=0.585, Rapi=0.955)

Show/Hide Pawn

Hunter

Final Stats		
Agility	8852	
Stamina	6436	
Health	193307	
Attack Power	16501	Effective on Target: 20667
Hit	8.94%	Chance to hit: 100%, 5 rating over cap
Crit	11.91% on target (32.07% overpower)	
Crit Dmg Bonus	150%	
Mastery Bonus:	29.18% Wild Quiver Proc	
Effective Speed Bonus:	44.33%	Avg Autoshot Speed: 2.87
Display Haste Bonus	15.57%	Avg Autoshot Speed: 2.58
Steady Focus Shot Cast Time:	1.73 sec	
Focus Shot w/ ESS/Frenzy	1.5 sec	
Avg Focus Shot Cast Time:	1.34 sec	

Stats from Gear	
Agility	5646
Stamina	6385
Attack Power:	80
Hit Rating:	566
Crit Rating:	1970
Haste Rating	1964
Mastery Rating:	1057
Avg Item Level:	399.2

faxZERO

Send a fax for free

Recipient information

Name: Jaelyn
Fax #: [redacted]

Sender information

Name: Angel
Email address: [redacted]

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Gift Tags • Fax Cover Sheets

www.FreePrintable.net

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 801-905-3883. Specify fax #837309. We will add your fax number to the block list.

Fax #
213. 294. 2943

Test Fax

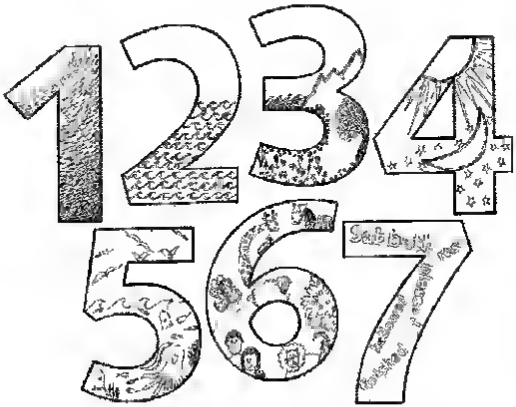
Bill

561-424-2440

Test Fax

Kelly@palmtech.net

God Created Everything!



Name_____

Virginia

Family

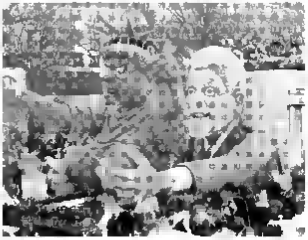
Dental

218 741

1445

TEST
FAX
2-26-13

70¢



Feet Test Print

8/22/16

Troubleshooting Your XFINITY Voice and Fax Machines

Account Configuration

Incompatible Equipment

Dialing

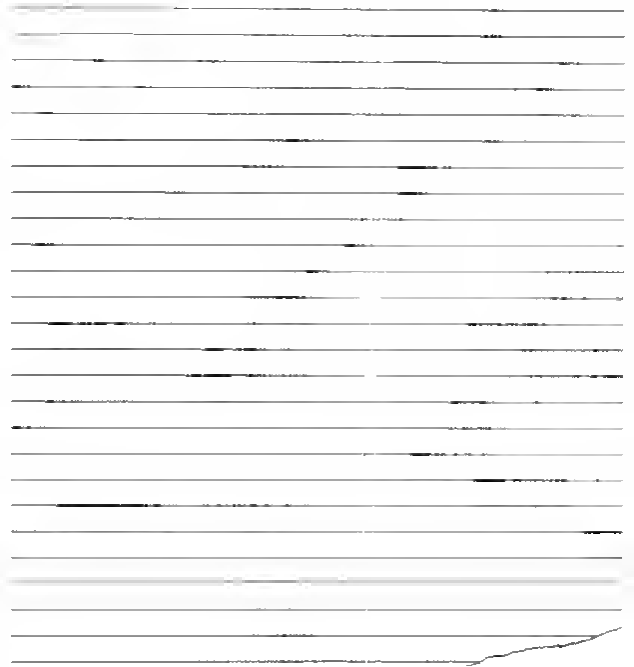
Recommended Settings

Hookups

Standard Wired Hookup

Silver Satin Two-Pin Cable

to DIAL
Anti-
Bacterial
Deodorant Soap



JIM'S EQUIPMENT REPAIR, LLC
1153 E 74th Avenue, Anchorage, AK 99518
907 344-5402 SHOP 907 344-5403 FAX jim@jimsequipmentrepair.com
Service Trucks ♦ Heavy Equipment Repair & Parts ♦ Marine Engine Sales
♦ Exchange Components ♦ Statewide ♦ Certified Engine Rebuilders
www.jimsequipmentrepair.com

FAX TRANSMISSION

DATE:_____ NO. OF PAGES _____

TO:_____ FROM:_____

ATTN:_____

COMMENTS:_____

Hail Mary:

Today begins the 90th Anniversary of the apparition of the Virgin of Fatima :

When you receive this email say a Hail Mary and ask for a special favor.

"Hail Mary, full of grace. The Lord is with thee. Blessed art thou among women and blessed is the fruit of thy womb, Jesus. Holy Mary, Mother of God, pray for us sinners, now and at the hour of our death, Amen.? (your request)

Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth. When you are down to nothing, God is up to something. This has been traveling since 5/13/07!

Love
Wendy

OSCAR
RULES!

1855330139

TRANSMISSION VERIFICATION REPORT

TIME 01/05/2012 14:53
NAME
FAX
TEL
SER # BRDA7J581153

DATE,TIME	01/05 14:53
FAX NO./NAME	5127910087
DURATION	00:00:00
PAGE(S)	00
RESULT	BUSY
MODE	STANDARD

BUSY- BUSY/NO RESPONSE

Friday, February 13, 2015

Reservation Confirmation
HF57F502-628-285
Created: 02/13/2015 06:38:11 GMT
Booking Source: Standalone

For:Ton **Hello BHALU BHAI SIR HOTEL SUIT1**
Fax: 1(935)-330-2239
Attn: **Ajesh Chandran**
Subject: Booking Confirmation

Dear Ajesh Chandran

We have pleasure in confirming your booking at the following Hotel. Please check the details below and let us know if you have any questions regarding your reservation. Please quote your confirmation number in all correspondence.

Thank You
Hello Travel

Guest Information

Contact	Ajesh Chandran	Staff	Meherabtra
Address	4th Varnet Forest West Zone	Phone	3000564
City	Mumbai	Country	INDIA
Email Address	devi1apers@almwright.com	Telephone Number	43334334343

Billing Information

Card Type	VISA	Card Date	02/2015
Card Number	4111111111111111	Card CID	950 20

Reservation Details

Reservation	1	Number of Nights	1
Arrival Date	February 20, 2015	Departure Date	February 21, 2015

Reservation Details For:

First Name	Ajesh	Last Name	Chandran
Room Rate	Daily	Full 20	
	Total	$32.00	

Daily Rates: $32.00
Tax (0.0%): $0.20 -- Fees ($15.00) = Total: $32.20

Rate for Taxes & Fees Prepaid in Full

Special Requests: Request...

Thanks for selecting Hello Travel for your travel needs.

Test

CH 12/13

ASSIGNED IPv6 SUBNET	[illegible]
ASSIGNED IPv6 GLUE SUBNET	[illegible]
LATENCY WAIVER	NO

Path Element Data

Step	Site(s)	ID	Element Type	Bi
2	[illegible] VIEW, CA 94043, MILES NO	[illegible]	Path Hop	[illegible]
3	[illegible] VIEW, CA 94043, MILES NO	[illegible]	Equip Port	[illegible]

DONALD TRUMP
MICHAEL FLYNN
MIKE PENCE
KELLYANNE CONWAY
SEAN SPICER
STEPHEN MILLER
PAUL MANAFORT
HOUSE of LIES

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3309 EAST LONGVIEW STREET, FAYETTEVILLE, AR, 72703 (479) 442-0344

Gynecological Cytology Report

Patient Information

Name: Benjamin Andersen
Age: 25 **Sex:** Male
DOB: 10/28/1991
Medical Record#: 9191
Encounter#: 9191919

Physician Information

Ordering: Kay Knapp
15440 Laguna Canyon Rd, Suite 260, Irvine 92618

Accession # 20890

Date Collected: N/A
Date Received: 10/04/2016
Date Reported: 10/05/2016, 05:19:15 AM

CC:

CLINICAL HISTORY:

LAST MENSTRUAL PERIOD:
N/A

CONTRACEPTIVE HISTORY
N/A

FINAL DIAGNOSIS:
SATISFACTORY FOR EVALUATION ENDOCERVICAL COMPONENT ABSENT HORMONAL EFFECT CONSISTANT WITH AGE AND HISTORY (cycling woman)

ATYPICAL ENDOCERVICAL CELLS OF UNDETERMINED SIGNIFICANCE

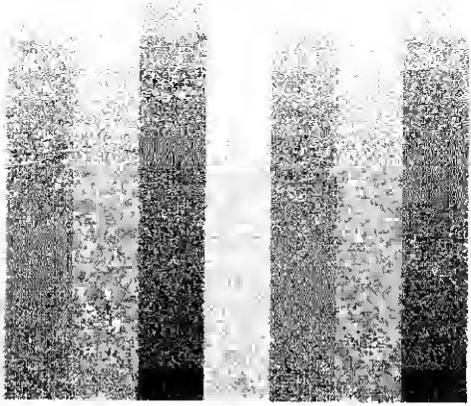
COMMENT:
FUNGAL ORGANISMS MORPHOLOGICALLY CONSISTENT WITH CANDIDA SPP

This Pap smear was screened by the ThinPrep® Imaging System along with an additional manual rescreening by a cytotechnologist.

PREVIOUS PAP/HPV HISTORY
N/A

SPECIMEN SOURCE:
Cervical, 1 smear

Electronically Signed Out
Helen Administrator 10/05/2016, 05:19:15 AM



Shervin Basiri, RDMS
6610 Valley Circle Blvd ♦West Hills, CA 91307♦ Cell (818) 357-6351♦ shervin_basiri@yahoo.com

To Whom It May Concern

Re: Ultrasound Technician Position

Greetings! My name is Shervin Basiri and I am writing to express my interest in applying for the Ultrasound Technician position at your facility. As a highlight of my work experience, I have extensive knowledge and expertise providing diagnostic services to both inpatient and outpatients under the direction of a Radiologist and departmental protocols in hospital and clinical settings. I would appreciate the opportunity to meet with you to discuss the possibility of joining your group. Please see attached my resume for your review. I look forward to hearing from you soon.

Sincerely

Shervin Basiri, RDMS

Test Fax

Test Fax

Test Fax

Test Fax

Test Fax

TEST Fax

****
*** ERROR TX REPORT ***
****

INCOMPLETE TRANSMISSION

TX/RX NO.	0001
DESTINATION NUMBER	18084832563
DESTINATION ID	
ST. TIME	02/01 10:04
COMMUNICATION TIME	00'00
PAGES SENT	0
RESULT	48 STOP

FS1

ROPOSED TRAFFIC CIRCULATION

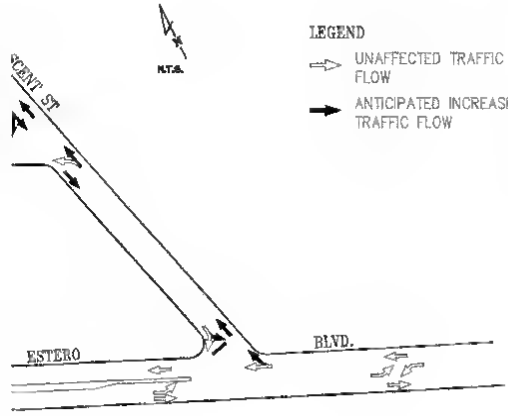


FIGURE 3

Welcome to

Windows® Fax and Scan

One place to send and fax your documents

FAX You can send and receive faxed documents on your computer without using a fax machine. You can also print, e-mail, or save a copy of your faxes

To get started

1 Connect a phone line to your computer

If your computer needs an external modem, connect the phone to the modem, and then connect the modem to your computer

2 On the toolbar, click **New Fax**

3 Follow the instructions in the setup wizard to connect to a fax modem, and then, when you're finished, create your fax

To connect to a fax server instead of a modem, contact your system administrator. For more help with faxing, click the **Help** button on the toolbar

SCAN After you add a scanner to your computer, you can preview documents or pictures before you scan them, and then adjust your scan settings for better results. You can also fax or e-mail scanned files to someone else

To get started

1 Connect your scanner to your computer by following the instructions that came with your scanner, and then place a document or picture on the scanner

2 In Windows Fax and Scan, at the bottom of the left pane, click **Scan**

3 On the toolbar, click **New Scan**.

4 Choose the scan settings you want to use, and you're ready to scan.

Use the options on the toolbar to fax, e-mail, print, or copy scans at any time. For more help with scanning, click the **Help** button on the toolbar

Shannen

Friday Apr 10, 2015

Reservation Confirmation
74878688-2697 283
Created: 04/11/2015 05:44:09 GMT
Booking Source: Standalone

For: Bhatu Bhai Hill Hotel & Suites
Fax: 1(055)-220-3239
Attn: Ajesh Patel
Subject: Booking Confirmation

Dear Ajesh Patel,

We have pleased that you have chosen our hotel for your travel plans. Please review the following information carefully. If you have any questions, please contact us at help@travelsight.com.

Thank You
Travelsight.com

Traveler Information			
Name:	Test	Phone:	8234566678
City:	Test	Country:	GN DEA
Email Address:	prasil.rajesh.behera77@gmail.com	Telephone Number:	8561362

Billing Information			
Card Type:	Visa	Card Expiry Date:	06/2015
Card Number:	411111111111111	Charge Total:	$40.80

Reservation Details			
Number of Rooms:	2	Number of Nights:	1
Check-In Date:	April 10, 2015	Check-Out Date:	April 11, 2015

Room Type: Test Room			
Bed Type:	Test	Smoking Preference:	Test
Room Rate:	Daily	Apr 10	
	Total	$20.00	

Sub-Total: $40.00
Tax (12.00%): $4.80 – Fees ($3.00) = Total $45.80

Rate per Person Based on Double Occupancy

Special Requests: Test

Thank You for Choosing Travelsight.com for Your Travel Needs.

Date. 10/29/09
Time 10:22:50

INVENTORY LIST
Holy Spirit Monastery Gifts

STOCK NUMBER	DESCRIPTION/BIN	NET ON SHELF	✓	IN STOCK	LOW LEVEL	BACK ORDERED	ON ORDER	COM-MITTED
CFSN	Monk's Mountain Bean Coffee	208	___	208		0	0	0
	Unassigned	208	___	208				0
CFSNLB	Monastery Coffee Bean 1 lb. Box	418	___	418		0	0	0
	Unassigned	418	___	418				0
CFGR	Monk's Mountain Coffee Ground	442	___	430		0	0	12
								3 Packed
	Unassigned	442	___	430				12
								3 Packed
CFGRLB	Monastery Coffee Ground 1 lb. Box	48	___	48		0	0	0
	Unassigned	48	___	48				0

CUMULATIVE TOTAL INVENTORY VAL

Chexly

Testing the HTML...

Xerox WC 7545

Configuration Report

xerox

Common User Data

Machine Profile

Machine Hardware

General Setup

Software Versions

Machine Upgrades

Connectivity Physical Connections

Connectivity Protocols

Network

Internal Networking

Connectivity Protocols (cont.)

TCP/IP

HTTP

SNMP

LDAP

Port 9100 Printing

SMB

WSD

WINS

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doordash

565 Stanford Ave Palo Alto CA 94306

(650) 691 9470

PRE-PAID

ORDER INFORMATION

Customer: Stan Tang

Delivery #: 40147

Restaurant: Bangkok Cuisine

Pickup Time: 2:33PM (Tue Feb 11)

Quantity	Item	Price	Subtotal
1 x	**Fresh Rolls - Duck** (Appetizers)	$8.95	$8.95
1 x	**Fried or BBQ Squid** (Appetizers)	$8.95	$8.95
		Subtotal	$17.90
		+ Tax (8.750%)	$1.57
		Commission (10.000%)	$1.79
		Total	$17.68

Windows 10 Test Machine

Report all feedback to SRPBETA@SRPNET.COM

Windows 10 Test Machine

Report all feedback to SRPBETA@SRPNET.COM

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FREE* Healthy Choice® Frozen Meal (up to $3.00) when you buy any **ENTÉE** (s) Healthy Choice® Frozen Meals

Cashier: Press 88 in price (Max. Value $3.00)

D9501NR-9612DM

Tommy Boyd

What is an Ultrabook™?

Date Completed 4/8/2013
Final Score 100%

1-888-377-1655

MT-MOBIL04%T&S Systeminformationsbericht [Komponenten_ Modem, Netzwerkadapter, USB].SysExporter-03MRZ2016.doc

Systemübersicht.Komponenten Modem

Element	Wert
Name	Sony Ericsson Device 9016 USB WMC Data Modem
Beschreibung	Sony Ericsson Device 9016 USB WMC Data Modem
Gerätekennung	Modem\
Gerätetyp	Externes Modem
Anschluss	COM4
Anrufannahmemodus	Nicht verfügbar
PNP-Gerätekennung	Nicht verfügbar
Anbietername	Sony Ericsson
Modem INF-Pfad	oem125.inf
Modem-INF-Abschnitt	ewd9016.Install
Bind aus	Nicht verfügbar
Bind ein	Nicht verfügbar
Kompression aus	+DS=0,+DR=0
Kompression ein	+DS=3,6,2048,32,+DR=1
Erzwungene Fehlerkontrolle	Nicht verfügbar
Fehlerkontrolle aus	Nicht verfügbar
Fehlerkontrolle ein	Nicht verfügbar
Flusssteuerung Hardware	Nicht verfügbar
Flusssteuerung aus	Nicht verfügbar
Flusssteuerung Software	Nicht verfügbar
DCB	&Mx01fc
Standard	<
Leerlaufzeitlimit	Nicht verfügbar
Modulation Bell	Nicht verfügbar
Modulation CCITT	Nicht verfügbar
Präfix	AT
Impuls	Nicht verfügbar
Zurücksetzen	AT&F<cr>
Textnamen für Rufannahmen	Sony Ericsson Device 9016 USB WMC Data Modem;Sony Ericsson;Sony Ericsson
Lautsprecher beim Wählen	Nicht verfügbar
Lautsprecher aus	Nicht verfügbar
Lautsprecher ein	Nicht verfügbar
Lautsprecher annähern	Nicht verfügbar
Lautstärke laut	Nicht verfügbar
Lautstärke leise	Nicht verfügbar
Lautstärke mittel	Nicht verfügbar
Zeichenfolgenformat	Nicht verfügbar
Abschlusszeichen	<cr>
Tonfrequenz	Nicht verfügbar

USER SETTING LIST

TIME 06/01/2007 03:14
NAME WARREN BUFF
FAX # 4[illegible]34
TEL # 416[illegible]88
SER # MFC4 [illegible]

PAPER SIZE	
CASSETTE #1	LETTER
CASSETTE #2	LEGAL
CASSETTE MP/#3 FOR FAX OR COPY	A4/LTR
DAY / TIME	06/01/2007
TIME	03:14
RING VOLUME	HI
BEEPER	LOW
SPEAKER VOLUME	OFF
HANDSET VOLUME	LOW
VOLUME CONTROL	OFF
CASSETTE #2	ON
AUTO DAYLIGHT	OFF
TONE / PULSE	TONE

RING DELAY	6 RING(S)
F/T RING TIME	20 SEC
FAX/TEL	ON
FAX RECEIVE CODE	ON *81 #81
ALT.S REDUCTION	
CHECK FOR 1D	ON
ID RULE	OFF
PRINT DENSITY	LEVEL 5

FAX RESOLUTION	STANDARD
OR AUTO TIMER	00:00
MULTI TASKING 2 FAX	ON
REAL TIME TX	OFF
COVERPAGE SETUP	OFF
CP ENGAGE RESPONSE	
5	
6	

[illegible] INITIALIZATION	OFF
ACTIVITY REPORT INTERVAL	EVERY 50 FAXES
START TIME	

FAX FORWARD/ACTION	OFF
FAX FORWARD NUMBER	
PAGING NUMBER	
PIN NUMBER	
FAX STORAGE	
REMOTE ACCESS	ON

DISTINCTIVE RING	OFF

FOCUS ONE LMITED
Phone 410 949 8604
FAX 443-930-5228
Address. 21[illegible]06

FAX

TO
FAX
DATE
ATTN
MESSAGE
SIRS

FROM ALBERT A
FAX # 443-930-5228
OF PAGES. 2

HHS

I.S

A Test

6/24/15

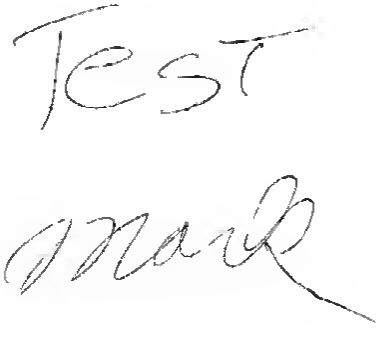
TEST

+ + + +

TEST

RSD

11/27/12


Test

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

Windows XP Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP LaserJet Professional CM1410 Series PCL 6 on DESKTOP.

The information below describes your printer driver and port settings

Submitted Time: 6:51:48 PM 12/29/2010
Computer name: DESKTOP
Printer name: HP LaserJet Professional CM1410 Series PCL 6
Printer model: HP LaserJet Professional CM1410 Series PCL 6
Color support: Yes
Port name(s): HPLaserJetCM1415fnw
Data format: RAW
Share name:
Location:
Comment:
Driver name: unidrv.dll
Data file: hpc1410c.gpd
Config file: hpmdp103.dll
Help file: unidrv.hlp
Driver version: 6.00
Environment: Windows NT x86
Default datatype: RAW

Additional files used by this driver:

C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcp1410.cfg
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpc14106.xml
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcsc103.dtd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpc1410c.ini
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcg6.hpx
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpc6m103.gpd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpuim103.upd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcsm103.gpd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcui103.dll (61.103.09.7071)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcpt103.dll (61.103.09.7031)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpc3r103.dll (61.109.09.7071)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpc6r103.dll (61.109.09.7071)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcbr103.dll (61.103.09.7071)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcdm32.dll (1, 0, 3, 42)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpbcfgre.dll
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\ctsum.dll (1,1,4,51)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\ctsum32.msi
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcpe103.dll (61.103.09.7031)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpeur103.dll (61.103.09.7031)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpmsn103.dll (61.103.09.7031)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpms103.dll (61.103.09.7031)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcsn103.dem
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcset30.dll (0, 3, 12, 12)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpcey103.dll (61.103.09.7071)
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\pclxl.dll (6.0.5479.0
(vbl_mcp_dz_drivers 06bc1e1f19))
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\cji.gpd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\pclxl.gpd
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\hpch1103.cab
C:\WINDOWS\System32\spool\DRIVERS\w32x86\3\unires.dll (6.1.7600.16385
[illegible]

Test
Fax
-HMG

This is a TEST fax from RingCentral

This is a TEST fax from RingCentral

KaMMCO
Kansas Medical Mutual Insurance Company

929 SW 10th Avenue
Topeka, Ks 66612
www.KaMMCO.com

YOUR PROTECTION. YOUR VALUES.
YOUR COMPANY.

FAX

To:	faxToy	From:	JasonRiggins
Fax Number:	15032001300	Fax Number:	785.232.4704
Company:		Total Pages:	1
Voice Number:		Voice Number:	785.232.2224
Subject:	FW: Me Test Fax	Date:	October 20, 2010
Memo:			

From: JasonRiggins
Sent: Wednesday, October 20, 2010 12:54 PM
To: faxToy (Business Fax)
Subject: Me Test Fax

Me test fax

If you would not like to receive faxes from us, please respond to this message. We will honor your request. For those of you that do not wish to receive faxes from us, please be aware that this message was sent to you in accordance with all applicable laws, including the Telephone Consumer Protection Act. We have established business relationships with many thousands of individuals and companies, and while we do not wish to receive unsolicited faxes, it is possible that from time to time, one may be sent to us in error. We apologize for the inconvenience this may cause you, and we request that you accept this as our personal assurance that no further faxes will be sent. Please call or e-mail us with any questions or concerns regarding this matter. We sincerely apologize for any inconvenience this may cause you, and we assure you that it was sent in error. Thank you for your cooperation. We look forward to hearing from you soon.

... 50152695ad CASE #8876050

Abeo Management Corporation Payment Receipt

donotreply@emdeon.com
Today, 8:29 AM
You

Reply

Inbox

Attachments, pictures, and links in this message have been blocked because the sender isn't in your Safe Senders list. Trust content from donotreply@emdeon.com

Mountain West Anesthesia
PO Box 3570
Salt Lake City UT 84110-3570

Customer Receipt Number:	**61807308**
Merchant ID:	**MWST**
Transaction ID:	**AR1AE1E12362**
Auth Code:	**304473**

Account#	Sub Account#	Account Name	Payment Amount	Trans Type
7916095	7916095	ERLINDA REYES ANDERSON	$53.58	Sale
	Total Payment Amount:		**$53.58**	

Payment Information

Date of Payment: 1/17/2017 10:29:13 AM Central time
Payment Type: MasterCard
Credit Card Number: **********1693
Message

THIS IS A TEST

How to FAX

On the main menu, showing all three icons.

(Copy Secure Print and ShareScan)

- Select Sharescan
- Select the keyboard icon to enter username (same login you use for your computer) click green check mark
- Select the keyboard icon to enter password (same password you use for your computer) click green check mark
- LOGIN (icon at the bottom right corner)
- Four icons will appear scan to fax, scan to mail, scan to self, expense receipt

- Place documents in feeder select the scan to fax icon then select next
- Select the recipient keyboard to enter name click on green check mark
- Select the Fax # keyboard to enter number by dialing 1-AREA CODE, etc. click on green check mark (Do NOT dial 9 first)
- Select send icon at the bottom right corner
- Log Off

Did client have HIV test during treatment at this facility?	Client/ but Refused
If tested, Did client get HIV test result?	N/A
Was any urine analyzed for Illegal drugs?	Yes
How many urine tests were done?	11
How many tests were positive for drugs?	11
Evaluation of Client Goal Achievement	**Alcohol Drug** Partially Achieved **Education** Achieved **Employment** Partially Achieved **Legal/Cost** Not Achieved **Psychological/Mental Health** Not Applicable **Family Situation/Social** Partially Achieved **Physical Health** Achieved
Date of Last Face-to-Face Client Contact	1/3/2017
Reason for Discharge	Treatment plan not completed
Continuing Care Type	Transfer to different level of care within same agency and clinic site
Reason for treatment not completed	Needs different Level Of Care
Continuing Care NJSAMH Tx Agency	Testing Demo Company
New Level of Care	Detox Hospital Inpatient
Release Records (Client signed consent to release records to referral to continuing care agency)	No
Discharge Comments	Test Tst Tset Test

Counselor Signature

Edwin M Dunlap,SAMMH-Counselor

Date Signed
5/2/2017

Supervisor Signature

Edwin M Dunlap,SAMMH-Counselor

Date Signed
5/2/2017

Monday, January 12, 1015

Reservation Confirmation
6229E675-2541-283
Created: 01/12/2015 10:07:17 GMT
Booking Source: Travelocity

For:Mr. Bhatu Bear-Hill Hotel & Suites
Fax: 1(055)-880-3239
Attn: Ajesh Patel
Subject: Booking Confirmation

Dear Ajesh Patel,

We have pleasure in confirming your booking as per the following details. Please check the information carefully and contact us immediately if there is any discrepancy.

Thank you for choosing Hill Hotel & Suites. We look forward to welcoming you soon.

Yours sincerely,
Manager

Guest Information

Contact:	Jay deep	State:	Maharashtra
Address:	Dadar	Postcode:	123456
City:	Mumbai	Country:	INDIA
Email Address:	jeedeep.malhotra@mailg.bt.com	Telephone:	12345678

Billing Information

Credit Card:	Visa	Exp. Dt.:	09/2015
Credit Card No:	4111111111111111	Card Holder:	Amit Rao

Booking Details

No. of Rooms:	1	No. of Nights:	12
Check In:	January 12, 2015	Check Out:	January 24, 2015

Rooms, Rates & Availability (All rates are in USD)

Room Type:	Jay			Bed Type:	deep			
Deep Deal	Date:	Jan 12	Jan 13	Jan 14	Jan 15	Jan 16	Jan 17	Jan 18
	Rate:	$45.00	$45.00	$45.00	$45.00	$45.00	$45.00	$45.00
	Date:	Jan 19	Jan 20	Jan 21	Jan 22	Jan 23		
	Rate:	$45.00	$45.00	$45.00	$45.00	$45.00		

Room Total: $540.00
Tax (17.00%) — $91.80 — Service Charge (10.00%) — $54.00 — Total: $585.00

Rate Description: Deep Deal
Rate: 50.00% off on 3 Nights and more

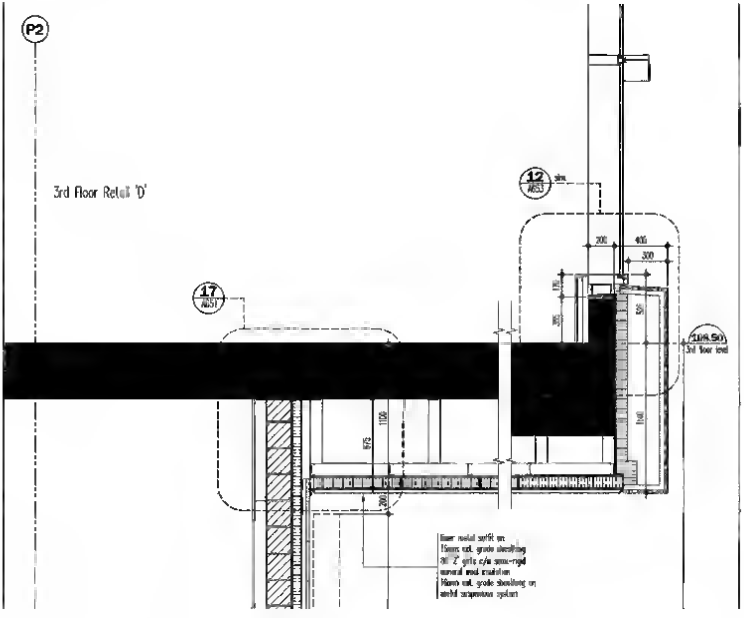
Special Requests Note:

TEST

MY

FAX

interpage
INTERPAGE™ NETWORK SERVICES INC.


P2
3rd floor Retail 'D'
12
A653
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550
1140
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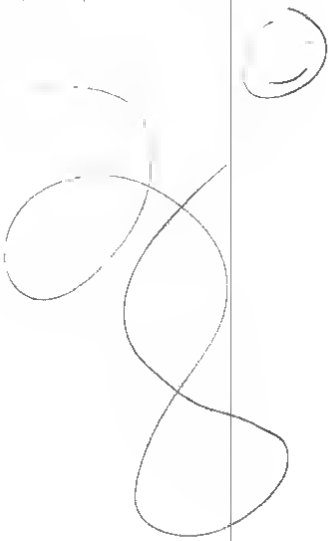
1100
200
(104.50)
3rd floor level

Test 1



FAX

To: 8553301239
Company
Fax: 8553301239
Phone

From: Ed Furlong
Fax
Phone
E-mail: edwardfurlong@umich.edu

NOTES:

test

Date and time of transmission: Wednesday, Mar. 13, 2013 1:02:30 PM
Number of pages including this cover sheet: 01

TO: ATTN: TIFFANY FROM:JoAnna – AEGIS

FAX #:564-4502 FAX #: 216-9311

DATE: 2-19-15

Memo

Hi Ladies:

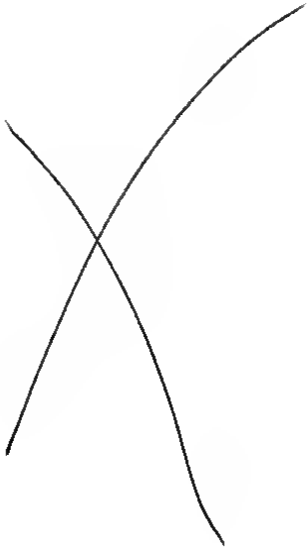
The lab received a blank requisition. Could you please fill out the information on the additional test auth form and fax back asap to the number listed on the form so they can begin the testing process and get your report back to you quickly. Thank you so much.

Also: We should have the final 2 days set in stone now on Monday and Wednesday. I heard back from client services today and they said it was all done. I will follow up and check in next week to see if in fact it did happen. Thank you so much. Have a great weekend

JoAnna Wigmon
405 471-2975

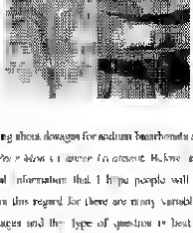
Free Lab Cover Sheet.com

TEST
888-877-1655



lent fax 3

Oral Dosages of Bicarbonate



Many people write to me asking about dosages for sodium bicarbonate and I tell them to read Sodium Bicarbonate – Medicine's Best Kept Secret for cancer treatment. Below is some information from that chapter with some additional information that I hope people will find useful. I have received responses to many people in this regard for there are many variables one has to consider when administering the route of dosages and the type of question is best answered by ones personal health care provider.

The best guidance for dosages for sodium bicarbonate is provided by—me's own urinary and salivary pH, which one takes in the morning or several times during the day when doing a heavy course of dosages for cancer or other serious diseases. One needs to buy inexpensive pH paper strips for this. Because Natural Alkalizing Medicine is devised for self administration I include as much information in my books as possible so people can find their way without having to depend on physicians but again it is always helpful to have good support when treating serious conditions.

There is no question that plasma bicarbonate concentrations are shown to increase after oral ingestion. The most important effect of bicarbonate ingestion is the change in acid–base balance as well as blood pH and bicarbonate concentration in biological fluids. In Europe, spa goers drink bicarbonate-rich water to heal ulcers, colitis and other gastric disorders. Ingesting bicarbonate by way of bathing stimulates circulation, possibly benefiting those with high blood pressure and moderate atherosclerosis.

702 Vegas

Test

Fax

* Test 2 *

Test 123

Deer Hunting

Four guys have been going to the same deer camp for many years. Two days before the group is to leave, Frank's wife puts her foot down and tells him he isn't going. Frank's friends are very upset that he can't go, but what can they do.

Two days later the three get to the camping site only to find Frank sitting there with a tent set up, firewood gathered, and dinner cooking on the fire.

"Damn man, how long you been here, and how did you talk your wife into letting you go?"

"Well, I've been here since yesterday. Yesterday evening, I was sitting in my chair and my wife came up behind me and put her hands over my eyes and said, 'Guess who?'" I pulled her hands off, and she was wearing a brand new see through nightie. She took my hand and pulled me to our bedroom. The room had candles and rose pedals all over. On the bed she had handcuffs, and ropes! She told me to tie and cuff her to the bed, and I did.

And then she said, "Do what ever you want."

So, here I am.

This is NOT a test -- Just the FAX, ma'am! No trees were harmed in creating this FAX

MONITORING AGREEMENT

GET HELP NOW, INC. Personal Emergency Response System
4712 Admiralty Way #229 Marina de Rey CA 90292 Toll Free (888) 473-2800 Fax (888) 748-7004 or (310) 645-6175

This Agreement is made as of April 26, 2018 by and between GET HELP NOW, INC., a California Corporation (herein "GHN" and...

Client/User: Vickie Fields-Byrd 6827 Bucknell Head Bryans Rd MD 208 # (301) 375-6054

GHN WILL MONITOR A PERSONAL EMERGENCY RESPONSE SYSTEM: A GPS MOBILE SYSTEM (SYSTEM"), SUPPLIED TO CLIENT ("YOU") BY GHN AND TO BE USED BY USER IN ACCORDANCE WITH THIS AGREEMENT AT A MONITORING FACILITY SELECTED BY GHN ("CENTER"). THE SYSTEM WILL REMAIN AT ALL TIMES THE SOLE AND EXCLUSIVE PROPERTY OF GHN AND IS NOT SOLD HEREBY. YOU ARE RESPONSIBLE FOR CONNECTING, ACTIVATING AND (IN THE CASE OF A GPS MOBILE SYSTEM) CHARGING THE SYSTEM IN ACCORDANCE WITH THE INSTRUCTIONS THAT ARE INCLUDED WITH THE SYSTEM. YOU ARE ALSO RESPONSIBLE FOR RETURNING THE SYSTEM TO GHN AT THE END OF THE TERM AS SET FORTH IN THIS AGREEMENT.

E THE USER IS OTHER THAN THE CLIENT, CLIENT ACKNOWLEDGES AGREES AND REPRESENTS THAT (I) USER OR USER'S LEGAL REPRESENTATIVE HAS HAD AN OPPORTUNITY TO REVIEW AND DID REVIEW AND AGREED TO ALL TERMS OF THIS AGREEMENT, INCLUDING SECTIONS 10 AND 11 THAT LIMIT OUR LIABILITY, AND IS BOUND HEREBY; (II) CLIENT IS SOLELY RESPONSIBLE FOR TIMELY PAYMENTS OF ALL FEES UNDER THIS AGREEMENT AND FOR THE PERFORMANCE OF ALL OTHER OBLIGATIONS BY USER AND CLIENT UNDER THIS AGREEMENT.

Payment Terms: For monitoring and repair of the System GHN will pay us the sum of $37 per month, payable $37.00 monthly in advance. While $37.00 per month is the "Standard Monthly Rate" for our GPS Mobile System, your actual monthly rate may be lower if you prepay on quarterly or annual plan and paid for the full quarter or year in advance. If your service is terminated by us or by the end user of the pre-paid quarter or year as the case may be, we will refund to you the difference between the quarterly or annual fee you paid and the applicable Standard Monthly Rate for any months the System was in use we will not pro-rate monthly fees and we will not refund any portion of one-time activation charges. The first payment is due upon ordering the System and will include (i) monitoring fees for the initial period under your selected plan (that is, monthly, quarterly or annual). Your monitoring fee will not be increased by GHN except as set forth in Section 2

Term and Termination: The initial term of the Agreement will commence on the earliest of the date of the Agreement or activation of the System and will continue for the period of your selected plan (that is, a year, a quarter or a month). Thereafter the Agreement will be renewed for subsequent terms equal to the initial term until either party to any time notifies the other in writing to terminate the Agreement upon a 30-day written notice (unless prohibited by applicable law in which case this Agreement is automatically renewable month-to-month). Additional termination events are set forth in Section 8 details

Client/User has changed from Basic System to BELLE+ MOBILE GPS. Upgrade balance is $12.95 plus previous balance of $24.00 the total total of $37.00. DUE UPON RECEIPT
FIRST PAYMENT OF $37 IS DUE MAY 01 2018, NEXT PAYMENT OF $37.00 IS DUE JUNE 01 2018.

Payment Authorization: Payment may be made by you through your valid credit card, debit card or debits to your bank account through the ACH or any other Electronic Funds Transfer ("EFT") We expect that you will make you payments on or debits the due date and otherwise comply with the Agreement. If no payment is received by us within five days of the due date we may terminate the System to us as set forth below you hereby authorize us to make charges to your credit card or to make an EFT from the account you provided to us or any successor or replacement card or account for all and any amounts due under this Agreement and your payment plan. If your card or account expires or is replaced you agree to notify us promptly of your new card or account For EFT charges, we will notify you at least 10 days in advance of any EFT debit that will be more than two times the normal amount under your payment plan and upon your written request we will a no notify you if the amount of the EFT transfer will vary by any amount. You further agree that any payments to be made pursuant to this authorization are discount rated or terminable by you or any payment is dishonored by the financial institution or is not otherwise paid for any reason, you payment obligations under this Agreement remain in full force and effect. If you fail to make any such payments we may terminate service ng any further services and all collection rights and remedies are expressly reserved

What You Need to Do to Start Service: We are not obligated to start monitoring service and the System will be IN DEMO TEST MODE until we have received (1) a fully executed copy of this Agreement; (2) a completed monitoring response information form ("RIF") and (3) successful test signals from the System. If this Agreement and completed RIF is not received within ten (10) days after we mailed to you the System you will receive a notice of termination along with a request for the return of our System

Return of System: If the monitoring of the System is cancelled or terminated for any reason to if you were leased by us a new system, you will return or cause User to return the System to us in good working condition by delivering it to our office at 5700 Hannum Ave, Suite 250 Culver City, CA 90230. If the System is not received by GHN within fifteen (15) days from the end of the 30-day notice period (or from the day of your receipt of a new System) we will charge your bank account or your credit card on file. In addition to any unpaid invoices an amount equal to $300.00 which you agree is the fair value of the System, for our loss of the System. THE ONLY WAY FOR YOU TO STOP BEING BILLED IS TO GIVE US A CANCELLATOR NOTICE AND TO RETURN OUR SYSTEM. [Agreement Continued on Next Page]

Client hereby acknowledges and agrees that: (i) this Agreement was negotiated and executed solely by means of facsimile, mail, telephone and/or internet communications and was not negotiated between the Client and a GHN representative in a personal meeting; (ii) in the Client's name; (iii) GHN is the owner of the System or the commencement of Service constitutes GHN's acceptance of this Agreement, (iii) unless otherwise required by applicable law Client will not receive a copy of this Agreement signed by GHN and such lack of receipt shall not, in any way, invalidate or otherwise affect this Agreement and/or GHN's and/or Client's acceptance hereof; and (iv) the Agreement you days signed and either returned to us by facsimile or mail is the only original Agreement between the parties for all purposes.

[For Residents of the State of New York] 1 YOU THE PURCHASER, MAY CANCEL THIS TRANSACTION WITH OR WITHOUT CAUSE AT ANY TIME PRIOR TO MIDNIGHT OF THE SEVENTH BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION II ON AND AFTER MIDNIGHT OF SUCH SEVENTH DAY YOU THE PURCHASER MAY CANCEL YOUR AGREEMENT WITH THE SELLER FOR YOU TO RECEIVE PERSONAL EMERGENCY RESPONSE SERVICE MORE THAN 30 DAYS AFTER YOU NOTIFYING THIS SELLER IN WRITING OF YOUR CANCELLING SUCH AGREEMENT PROVIDED THAT YOU HAVE LEGALLY OBLIGATED YOURSELF TO BEGIN LIVING IN A NURSING HOME OR OTHER HEALTH-RELATED FACILITY WITHIN SUCH 30-DAY PERIOD FOR WHAT IS EXPECTED TO BE A PERMANENT STAY OR AN EXTENDED STAY FOR AT LEAST 2 MONTHS ON THAT YOU HAVE ALREADY BEGUN LIVING THEREIN EXPECTING YOUR STAY TO BE PERMANENT OR FOR AT LEAST 2 MONTHS AND PROVIDED THAT THESE FACTS ARE VERIFIED BY YOUR DOCTOR OR BY THE NURSING HOME OR OTHER HEALTH-RELATED FACILITY

Using Software Wireless Phone Jacks or Voice Over IP (VOIP Internet Phones) can make the transmission function of the System unreliable and signals may not be received

Signatures by Client/User Only: Vickie Fields-Byrd

Print Client/User Name: Vickie Fields-Byrd Date Signed: 5-3-2018

Yukon
Education
Éducation

PDF Test File

Congratulations your computer is equipped with a PDF (Portable Document Format) reader! You should be able to v ew any of the PDF documents and forms available on our site PDF forms are indicated by these icons or

Yukon Department of Education
Box 2703
Whitehorse,Yukon
Canada
Y1A 2C6

Please visit our website at: http://www.education.gov.yk.ca/

ARLINGTON
THE AMERICAN DREAM CITY

Animal Services
1000 S.E. Green Oaks
Arlington TX, 76018

Medical Release

Date _____ Animal ID: _____

This animal has an unresolved medical condition. The condition is as follows.

_____
_____
_____
_____
_

As the adopter, you assume all financial responsibility for any further medical expenses this animal may require. If you adopt the animal, please schedule an appoint with your veterinarian within _____ days.

Adopter's Signature _____

Witnessed by: _____

Date _____

Thank you for adopting this very special animal!

Test

GNU GPL INFORMATION

FTE02 firmware contains third-party software licensed under the GNU General Public License (GPL). GratisSoftware means software under the applicable terms of the GPL. Please see the GNU General Public License (GPL) for the exact terms and conditions of this license.

GratisSoftware GNU GPL related source code can be downloaded from Gratisoft web site from [illegible]

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Weight Loss Success Stories Sylvie Lost Weight By Diet & Exercise

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Diet Weight Loss
Healthy Weight Loss Diet

E-Mail Address Go

profile

First Name: Sylvie
Age: 42
Family Status: Married
Occupation: Homemaker
Hometown: Canada
Pounds or Inches Lost: I lost 200 pounds
Starting Weight: 350 pounds
Current Weight: 147 pounds

5-10 lbs. lost | 10-20 lbs. lost | 20-30 lbs. lost | 30-50 lbs. lost | 100-150 lbs. lost | 150 + lbs. lost | View All Men | View All Women

BEFORE

AFTER

Sylvie Lost pounds!

Sylvie's Weight Loss Story!

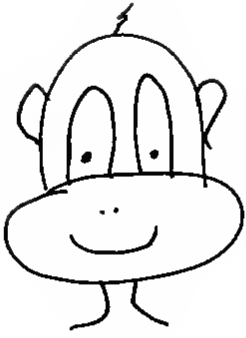
When did you become unhappy with your weight?

I was always unhappy with my weight but then I found out that my son was autistic. He was my inspiration to lose the weight. I started to be healthy for him.

What made you decided to lose weight?

My 4 year old autistic son. I felt that if I didn't do anything about my weight problems I would end up with lots of health problems and that my son needed me to carry for him.

What were the most important changes you made to lose weight?



Kathleen M Ashcraft

From: Supelyo Josh
Sent Monday, February 15, 2016 3:18 PM
To: Kathleen M Ashcraft
Cc: IT VOIP SUPPORT
Subject: INC000001182033

Hi Kathleen,

Good Afternoon

As discussed with you there is no problem in the fax machine (+1 514 777 7275). It can receive incoming FAX as well we tested an outgoing FAX to a test number 1-888-473-2963 which worked fine

The issue with the mt Clemens no (+1 5854683063) when I called this no I got no fax tone

As there are no issue found on hilliard I'm closing the ticket.

Thanks

Have a Great Day !!!

Sup lye Josh
Xerox Global Voice Team
Xerox Email : sup lye.josh@contractors.xerox.com
FCH Email : ejosh@icall.com
Noida | India
Cell +91-95909-59157

P55-330 1239

PCCharge 5.9.2 Authorization Networks and Features - VeriFone, Inc.

Payment Processor	PCCharge Processor ID	[illegible]	Features
PCCharge Auth Networks	ID		[illegible]
Alliance Data Systems, Inc	[illegible]	C	[illegible]
American Express	[illegible]	T	[illegible]
[illegible]	[illegible]	C	[illegible]
[illegible]	[illegible]	M	[illegible]
Chase Paymentech / Tampa	[illegible]	[illegible]	[illegible]
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*** ERROR TX REPORT ***
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INCOMPLETE TRANSMISSION

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DESTINATION ID	
ST. TIME	11/19 13 46
COMMUNICATION TIME	00'00
PAGES SENT	0
RESULT	NG #018
	LINE BUSY

TESTING

Hello
This is a test fax message
Please disregard!

TEST
FAX 2

no errors plz!

RUAN

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PayPal Email ID PP1590 [illegible]

855

330

1239

TEST

Date 2017-Nov-20
Page 1 of 1

FAX

FROM: Performance Physical Therapy
14019034976
401-903-2167

FOR: test
18553301239

MESSAGE:

test

HP Photosmart 7520 Series

Fax Log for
Pat Walker
2045964757
Jun 23 2014 3:22PM

Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
Jun 23	3:21PM	Fax Sent	5037357620	0:00	1	Error 345*

* A communication error occurred during the fax transmission
If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive fax. If you're receiving, contact the initiator and ask them to send the document again

TEST FAX from AD

TEST

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Maecenas porttitor orci nec placerat blandit, urna sapien tempus nisi, ac dapibus diam neque at diam. Sed maximus scelerisque velit, quis vehicula augue convallis sit amet. Fusce in lectus at justo fringilla elementum in quis nulla. Nullam bibendum tristique libero sit amet lobortis. Class aptent taciti sociosqu ad litora torquent per conubia nostra, per inceptos himenaeos. Duis orci sem, lacinia et massa ac, volutpat gravida enim. Nulla enim ante, mattis ac sem a, tempor fringilla metus. Aenean blandit ante nisi, eu tincidunt risus ornare posuere. Etiam vestibulum nisl at interdum efficitur. Nulla tincidunt, dui semper volutpat pharetra, lorem metus mattis metus, eget bibendum orci justo et magna. Quisque tincidunt efficitur ullamcorper. Maecenas commodo nisl vel orci tincidunt, eget porta nisi ullamcorper. Morbi quis diam malesuada lectus rutrum venenatis quis congue nisi. Nam accumsan massa vel convallis maximus. Quisque pretium, neque non aliquet egestas, ligula nibh finibus quam, nec semper felis purus imperdiet sem.

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Maecenas porttitor orci nec placerat blandit, urna sapien tempus nisi, ac dapibus diam neque at diam. Sed maximus scelerisque velit, quis vehicula augue convallis sit amet. Fusce in lectus at justo fringilla elementum in quis nulla. Nullam bibendum tristique libero sit amet lobortis. Class aptent taciti sociosqu ad litora torquent per conubia nostra, per inceptos himenaeos. Duis orci sem, lacinia et massa ac, volutpat gravida enim. Nulla enim ante, mattis ac sem a, tempor fringilla metus. Aenean blandit ante nisi, eu tincidunt risus ornare posuere. Etiam vestibulum nisl at interdum efficitur. Nulla tincidunt, dui semper volutpat pharetra, lorem metus mattis metus, eget bibendum orci justo et magna. Quisque tincidunt efficitur ullamcorper. Maecenas commodo nisl vel orci tincidunt, eget porta nisi ullamcorper. Morbi quis diam malesuada lectus rutrum venenatis quis congue nisi. Nam accumsan massa vel convallis maximus. Quisque pretium, neque non aliquet egestas, ligula nibh finibus quam, nec semper felis purus imperdiet sem.

Test fax from Circuit ID

Test fax from Circuit ID

Free & Open Source

ICTFAX

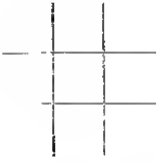
http://ictfax.org/

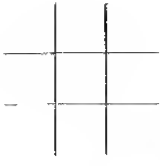
Email to FAX
FAX to Email
Web to FAX

TEST PAGE 1

ICT Innovations

This FAX was transmitted by Zoiper





HO WHITE

AHH, ABOUT THE TUNNELS
Did you get the meme?

2 Rivers

Dental

Thanks

Joan

Test

Test

Test

Test

Test
610-999-8338

test

fax

#1

PRÉCIS

Gastrointestinal Stromal Tumor (GIST) Biomarker Profile Summary

BIO THERANOSTICS

PATIENT	SPECIMEN	PHYSICIAN
Name TestLast, TestFirst DOB 1/3/1955 Sex M Medical Record NP	Order ID SCT13-000134 Sample ID SCT Specimen Biopsy Date Received 12/3/2013 Date of Collection 12/2/2013 Date Reported 12/04/2013	new test, M D newtesttesttest 9393 Towne Centre Dr Suite 100 La Jolla, CA 92037 (1 6) 8 8-877 1655

Tests Ordered: PRECIS® GIST Biomarker Profile

POSITIVE Test Results (Please see individual test reports for additional information)

None

NEGATIVE Test Results (Please see individual test reports for additional information)

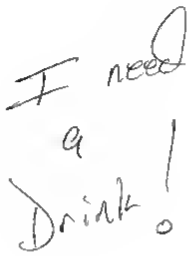
None

Quantity Not Sufficient and Canceled Tests

None

Laboratory Director: Veena M Singh, M D CLIA # 05 D1095725 CA556443 Electronically Signed By: Haven R Meyer M.D. Ph.D

©2013 Bio-Theranostics, Inc


I need
a
Drink!

DUMMY FAX DOCUMENT

NO CONTENT HERE

Test

Goose Bay

Test
Fax

MASTER55

POZYCJONOWANIE
PROMOCJA

CHICAGO

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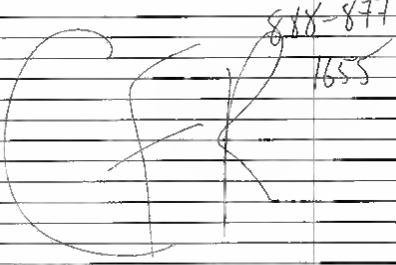
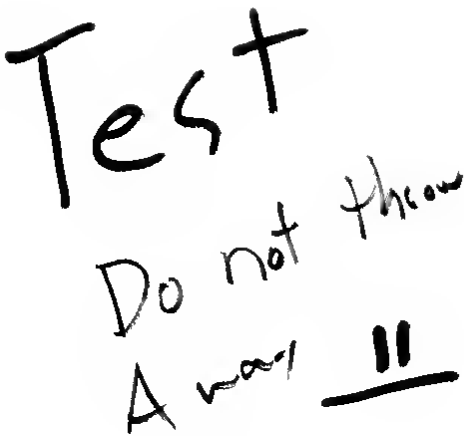


2/24/12


Test
Do not throw
Away

This
IS A
TEST

Test Fax

9-19

Test fax from Circuit ID

Vonage Test Fax

Fill in the values below and click "Print Test Fax Page"

To:	From:
Fax:	Fax:
Phone:	Phone:
Subject: Test Fax	Date:

Fax Settings

Reference your Owner's Manual for help adjusting the settings below

ECM (error correction mode)	Off
Baud Rate	9600
International	On (this is set on a per-call basis)
Resolution	Standard
Answer Mode	Fax Only
Rings to Answer	Zero (0)
Call Waiting	Off
Bandwidth Saver	High (30 kbps)
Distinctive Ring	Off

Troubleshooting Steps

The steps below will help you resolve common faxing problems.

- Switch off fax machine and unplug power adapter from device and from wall outlet.
  - Let fax machine remain off for 60 seconds
- Try a different phone cord between the fax machine and the Vonage device
- Eliminate any splitters between the fax machine and the Vonage device
- Connect Fax machine directly to the Vonage device, bypassing any home wiring.
- If using an All-In-One device, temporarily disconnect device from PC.

Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help.

Call us at 1-VONAGE-HELP (1-866-243-4357) or visit **www.vonage.com**

본 통지서에는 귀하의 보험 가입이나 의료 보험 적용 범위에 대한 중요한 정보가 담겨 있습니다. 본 통지서에 나와 있는 중요한 날짜를 확인해 보십시오. 귀하께서는 특정 마감 기한까지 조치를 취하셔야 계속 보험 적용을 받거나 비용 지원을 받으실 수 있습니다. 귀하 본인이나 귀하가 도와주고 있는 사람이 본 통지서나 의료 보험 적용 범위에 대한 질문이 있는 경우 본인 비용 부담 없이 모국어로 지원 및 정보를 받으실 수 있습니다. 통역사와 통화를 희망하면 1-855-904-2583 번(수신자 부담)으로 연락하시기 바랍니다. 으로 전화하십시오. TTY 사용자는 711 로 전화하십시오

REST IN PEACE

ตัวอักษรนี้มีข้อมูลที่สำคัญเกี่ยวกับการประกันสุขภาพของคุณ ตรวจดูวันที่สำคัญที่ระบุไว้ในจดหมายนี้ เพื่อที่คุณจะได้ดำเนินการที่จำเป็นภายในกำหนดเวลาที่กำหนดไว้ มิฉะนั้นคุณอาจเสียสิทธิ์ในการรับความคุ้มครองหรือความช่วยเหลือด้านค่าใช้จ่ายด้านการดูแลสุขภาพ หากคุณมีคำถามเกี่ยวกับจดหมายฉบับนี้หรือความคุ้มครองด้านการดูแลสุขภาพของคุณ คุณสามารถติดต่อขอรับความช่วยเหลือและข้อมูลเป็นภาษาของคุณได้โดยไม่มีค่าใช้จ่าย เพื่อโทรหาล่ามแปลภาษา ให้โทรหา 1-866-356-2423 (เป็นโทรศัพท์ฟรี) สำหรับ TTY ให้โทรหา 711

Ang paunaweng ito ay may mahalagang impormasyon tungkol sa iyong aplikasyon o saklaw ng planong pangkalusugan. Maghinap ng mahahalagang petsa sa paunawang ito. Maaaring kailanganin mong gumawa ng aksyon sa pamamagitan ng ilang mga itinakdang panahon upang mapanatili ang iyong saklaw o makatanggap ng iulong para sa mga gastos. Kung ikaw, o ang isang tao na tinutulungan mo ay may mga katanungan tungkol sa paunawang ito o saklaw ng planong pangkalusugan makatatanggap ka ng tulong at impormasyon sa iyong wika nang walang gastos. Upang makipag-usap sa isang taga-interpret, tumawag sa 1 866-537-7720 (walang bayad ang toll). Para sa TTY, tumawag sa 711

Diese Mitteilung enthält wichtige Informationen zu Ihrem Antrag oder zur Abdeckung durch Ihren Gesundheitsschutzplan. Beachten Sie wichtige Daten in dieser Mitteilung. Sie müssen unter Umständen innerhalb gewisser Fristen bestimmte Handlungen ergreifen, damit Ihre Abdeckung bestehen bleibt oder Sie Kostenunterstützung erhalten. Wenn Sie oder eine Person, die Ihnen zur Seite steht, Fragen zu dieser Mitteilung oder zur Abdeckung durch den Gesundheitsschutzplan haben, können Sie kostenlos Hilfe und Informationen in Ihrer Muttersprache erhalten. Um mit einem Dolmetscher zu sprechen, wählen Sie 1-866-289-7402 (gebührenfrei). Für TTY wählen Sie 711

ตัวอักษรฉบับนี้ประกอบด้วยข้อมูลที่สำคัญเกี่ยวกับการประกันสุขภาพของคุณ ตรวจดูวันที่สำคัญที่ระบุไว้ในจดหมายนี้ เพื่อที่คุณจะได้ดำเนินการที่จำเป็นภายในกำหนดเวลาที่กำหนดไว้ มิฉะนั้นคุณอาจเสียสิทธิ์ในการรับความคุ้มครองหรือความช่วยเหลือด้านค่าใช้จ่ายด้านการดูแลสุขภาพ หากคุณมีคำถามเกี่ยวกับจดหมายฉบับนี้หรือความคุ้มครองด้านการดูแลสุขภาพของคุณ คุณสามารถติดต่อขอรับความช่วยเหลือและข้อมูลเป็นภาษาของคุณได้โดยไม่มีค่าใช้จ่าย เพื่อโทรหาล่ามแปลภาษา ให้โทรหา 1-855-906-2583 (เบอร์ฟรี) สำหรับ TTY ให้โทรหา 711

Dú ci nts'íjí bąą ółáyą́ bínaaltsoos dóó bee nik'í adeet'i'ígi ałáhgo bínabjį' ehóhzinígi át'é. Yeeskáat dahika'ígi bąą ákoolnínzo doolee'ł. Łahda t'áadoo ałnáo' jółkáhí ei dlíí naaltsoosbąąhdzinígi jíh díí sha bik'e ałdaadoo jníinzgo. Ni éí doodago'ół t'aa hóóda bika'mułyeedígi díí naaltsoos dóó bik'e ałdaadoo bąąh ne'ldlóół ałchoołógo éí t'áájíík'e t'áá ałtsoół k'ehjí bee nihodoonnih dóó nika adoolwołgo ei át'é. Ata' halne' éí'a bich'į' hadeeztsoh nínízingo éí ałqqeo tógoeeníjí, t'áá jíík'e bóółsh bee hodíilnih. TTY bąąnyágo éí łáąh bóółsh bee hodíilnih

Image_20240821_Portland_20240821_0001

Joshua

Date March

The Goat in the Rug
Comprehension

Conclusions, Selection Test

100 0 8/10 80

Think back to the selection "The Goat in the Rug" to answer questions 1–10. Mark the space for the best answer to each question.

1 2 5 2

1. What does Geraldine mean when she says that Glenmae decided to weave her into a rug?
   - ○ Glenmae would weave Geraldine's name into a rug
   - ○ Glenmae would trap the goat by weaving around her
   - ○ Glenmae would weave a rug with a picture of a goat
   - ● Glenmae would use Geraldine's wool to weave a rug

2 2-A

2. From what Geraldine says, the reader can tell that mohair is —
   - ○ a woman's hair
   - ● wool from a goat
   - ○ dye made from plants
   - ○ a sharp tool for cutting wool

3

3. What does Glenmae do to the wool **BEFORE** she spins it?
   - ● She cuts it, washes it, and combs it
   - ○ She dyes some of it red, brown, and black.
   - ○ She makes dye out of plants that she picks
   - ○ She twists it around a stick called a spindle.

2-55

go on

Matthew

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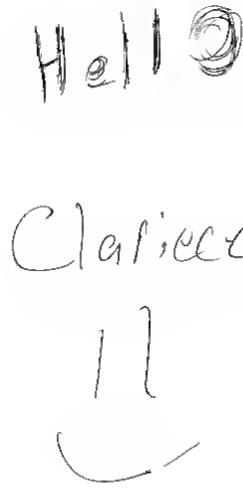
DUMMY FAX DOCUMENT

NO CONTENT HERE


Hello
Clarice

FAX COVER SHEET

Recipient Information
To ryan (r4a)
Fax# 18888771655
Subject

Sender Information
From
Pages 1
Date Apr 21, 2011

Comments

test

1 888-877 1655 or 1 503-290-1300

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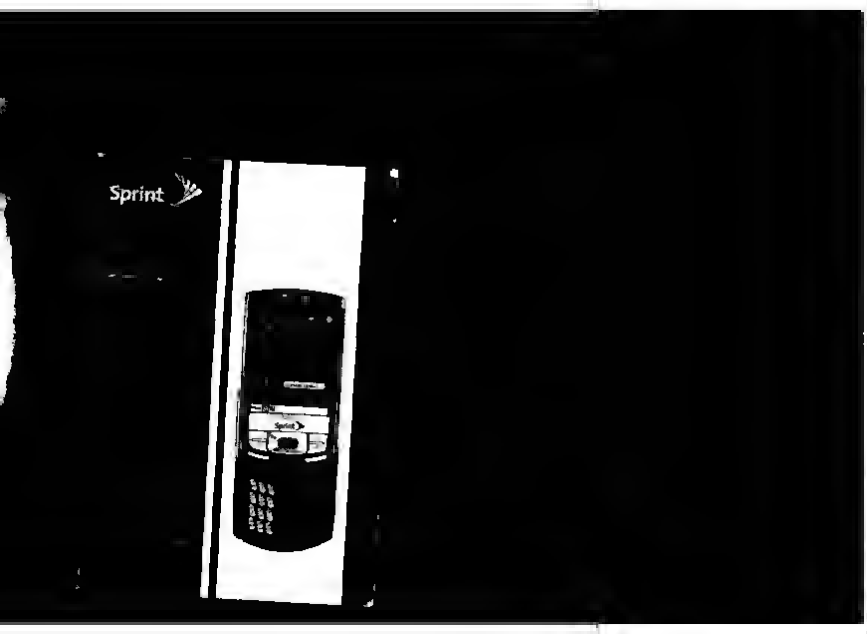
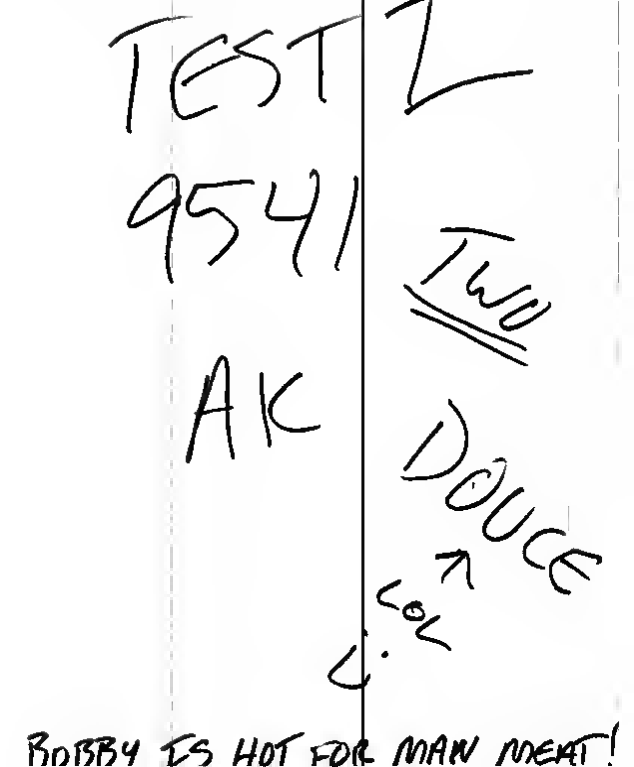

Sprint

Test



BOBBY IS HOT FOR MAN MEAT!

Vonage Test Fax

To:	From: Jeff
Fax:	Fax: 1-732-946-6452
Phone:	Phone:
Subject: Test Fax	Date:

Fax Settings

Reference your Owner's Manual for help adjusting the settings below

ECM (error correction mode)	Off
Baud Rate	9600
International	On (this is set on a per-call basis)
Resolution	Standard
Answer Mode	Fax Only
Rings to Answer	Zero (0)
Call Waiting	Off
Bandwidth Saver	High (90 kbps)
Distinctive Ring	Off

Troubleshooting Steps

The steps below will help you resolve common faxing problems.

- Switch off fax machine and unplug power adapter from device and from wall outlet.
  - Let fax machine remain off for 60 seconds.
- Try a different phone cord between the fax machine and the Vonage device.
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device bypassing any home wiring.
- If using an All-In-One device, temporarily disconnect device from PC

Further Assistance

If you need further assistance using your Vonage Fax Service we are always available to help.

Call us at 1-VONAGE-HELP (1-866-243-4357) or visit www.vonage.com

DELL

Fax Setup Help

Fax Setup Help	For additional information, see your User's Guide found on the *Drivers and Utilities* CD or at support.dell.com. To complete fax setup later, use the printer's Operator Panel to navigate to Setup→ Fax Setup→ Setup Wizard.	Machine ID Enter a Fax header using the printer's Operator Panel numerical key pad. Tip: Enter your Fax number.	Receive Mode Based on how you receive a Fax call, select either Fax, Tel or Ans/Fax Mode. Tip: Select Fax Mode if it's a direct connection to a wall socket.	Rings to Answer Set the number of rings before your printer answers a Fax call. Tip: 1	Verify that the Line Test and Dial Tone Test are successful. Ensure that the Ready screen appears
Help bij het instellen van de Fax	Raadpleeg uw gebruikershandleiding voor meer informatie. U vindt deze op de cd *Drivers and Utilities* (Stuurprogramma's en Hulpprogramma's) of op support.dell.com. Als u het instellen van de fax later wilt voltooien, gebruikt u het bedieningspaneel van de printer om naar Setup→ Fax Setup→ Setup Wizard te gaan.	Apparaat id Geef een koptekst op met het numerieke toetsenbord van het bedieningspaneel van uw printer. Tip: typ uw faxnummer.	Ontvangstmodus Selecteer de modus Fax, Tel of Aan/Fax, al naar gelang de manier waarop u faxen binnenkrijgt. Tip: selecteer de modus Fax, gaat een rechtstreekse aansluiting op een telefoonsnoer(stekker).	Aantal keren overgaan voor antwoord Stel het aantal keren in dat de telefoon moet overgaan voordat uw printer een faxsignaal beantwoordt. Tip: 1	Controleer of de kiestoon en testfunctie met goed gevolg verlopen Controleer of het scherm Gereed (gereed) wordt weergegeven.
A de la configuration du fax	Pour de plus amples informations, reportez-vous au *Guide d'utilisation* disponible sur le CD *Drivers and Utilities* (Pilotes et utilitaires) ou à l'adresse support.dell.com. Pour poursuivre la configuration ultérieurement, allez sur Setup (Configuration)→ Fax Setup→ Setup Wizard (Assistant de configuration) en vous servant du panneau opérateur de l'imprimante.	ID machine Saisissez un en-tête de fax à l'aide du pavé numérique du panneau opérateur de l'imprimante. Conseil: saisissez votre numéro de fax.	Mode réception En fonction de votre mode de réception de fax, sélectionnez le mode Fax, Tél ou Auto/Fax (Répond.Fax). Conseil: sélectionnez le mode Fax (en cas de connexion directe à une prise murale).	Nombre de sonneries Définissez le nombre de sonneries de l'imprimante avant qu'elle ne réponde à un appel Fax Conseil: 1	Effectuez le test de tonalité et le test de fonctionnalité L'écran Prêt doit apparaître
Fax Setup Hilfe	Weitere Informationen finden Sie in der Bedienungsanleitung auf der CD *Treiber und Dienstprogramme* oder unter support.dell.com. Um das Fax-Setup später fortzusetzen, verwenden Sie die Bedienungskonsole des Druckers, um zu Setup→ Fax Setup→ Setup Wizard zu navigieren.	Gerätekennung Geben Sie mithilfe des Nummernfelds auf der Bedienungskonsole Ihres Druckers eine Faxkennung ein. Tipp: Geben Sie Ihre Faxnummer ein.	Empfangsmodus Wählen Sie aufgrund Ihres Faxempfangs Fax, Tel oder Ant./Fax-Modus. Tipp: Wählen Sie den Fax-Modus, wenn eine direkten Verbindung zu einer Wandsteckdose.	Klingeln für Antwort Stellen Sie die Anzahl der Klingeltöne ein, nach denen Ihr Drucker den Faxanruf beantwortet Tipp: 1	Prüfen Sie ob die Leitungstest und Wahlton test erfolgreich sind Stellen Sie sicher, dass der Bildschirm "Bereit" erscheint

FAX

To: **Test Neme**
Company
Fax 8553301239
Phone

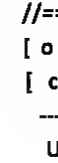
From:
Fax
Phone
E mail

NOTES:

Date and time of transmission Monday, June 11, 2018 12:44:12 PM
Number of pages including this cover sheet 01

Hi there!

I am a test fax.



Richard K. Brunk, Attorney At Law

To:	Faxtoy Net	From	Rick Brunk
Fax:	1-866-377-1955	Pages:	1
Date:	7/22/2014	Time:	2:01:04 PM

Subject: This is A Test

I am attempting to send a fax

Please Call Immediately If Facsimile Is Incomplete Or Illegible

13321 North Outer Forty Road - Suite 700 - Chesterfield MO 63017 - 636 532-4244

1. My phone connection must be really bad
For my fax to get jumbled like this all the time

2. My phone connection must be really bad
For my fax to get jumbled like this all the time

3. My phone connection must be really bad
For my fax to get jumbled like this all the time

4. My phone connection must be really bad

ZOMG

HI

EVERYBOPY

In Process Silk Screen Inspection

50 Piece Inspection **Pass / Fail**

Time _____

Tape Test (Pass / Fail) If Fail, how many defects? _____

In-House Labels Identified Correctly (Yes / No)

Inspection Paperwork Filled Out (Yes / No)

Are there any defects found by Operator (Yes / No) If Yes, were steps taken to correct defect (Yes / No)

UPC Readability Results ____ ____ ____ ____ ____ (Pass / Fail)

Comments _____

50 Piece Inspection **Pass / Fail**

Time _____

Tape Test (Pass / Fail) If Fail, how many defects? _____

In-House Labels Identified Correctly (Yes / No)

Inspection Paperwork Filled Out (Yes / No)

Are there any defects found by Operator (Yes / No) If Yes, were steps taken to correct defect (Yes / No)

UPC Readability Results ____ ____ ____ ____ ____ (Pass / Fail)

Comments _____

Signature: _____

FJ1173

FAX

Test

1 **Weekends**: [illegible]

2 **Midweek**: In addition, [illegible]

[illegible]

3 **Special parts [illegible]**

a. [illegible]

b. Halloween: [illegible]

c. [illegible]

d. [illegible]

e. [illegible]

4 **Holidays**: [illegible]

	Even-Numbered Years	Odd-Numbered Years	[illegible]	
Easter	[illegible]	Mother	[illegible]	[illegible]
[illegible]	Mother	Father	[illegible]	[illegible]
[illegible]	[illegible]	Mother	[illegible]	[illegible]
Labor Day	Mother	Father	[illegible]	[illegible]
Halloween	Mother	[illegible]	[illegible]	[illegible]
Thanksgiving	Father	Mother	[illegible]	[illegible]
Christmas Eve	Mother	Father	[illegible]	[illegible]
Christmas Day	Father	Mother	[illegible]	[illegible]
New Year's Eve/Day	Mother	Father	[illegible]	[illegible]

f. [illegible]

5 **Breaks**: [illegible]

[illegible]

[illegible]

6 **Vacations**

a. [illegible]

b. [illegible]

c. [illegible]

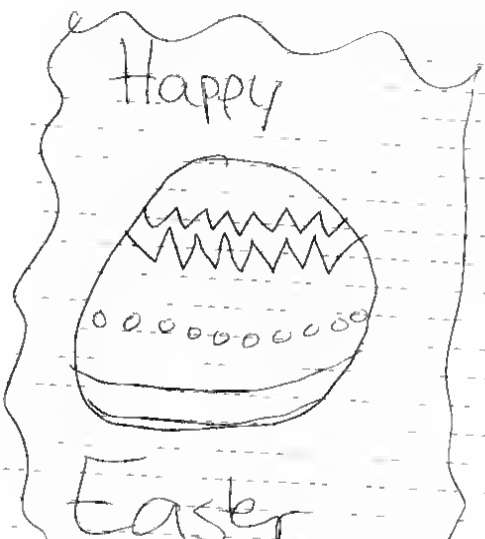
d. [illegible]

e. [illegible]

f. [illegible]

vkOewpnw mahTestTextFile txt

test text file


Happy
Easter

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English ⬍ →

[illegible] 100 000+ [illegible]

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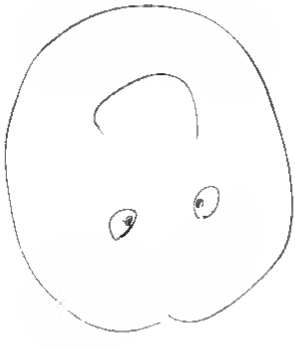
T



THE MEDICAL
RESOURCE
NETWORK, INC.

DATE:	May 4, 2016
TO:	Fax Toy
FAX NUMBER	1-855-330-1239
FROM	
TOTAL PAGES (including cover).	1
REGARDING:	TEST
MESSAGE:	

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THE MEDICAL RESOURCE NETWORK INC
5285 Meadows Road, Suite 185 Lake Oswego, Oregon 97035 | 503.452.1748 | 888.899.1409 | www.medres.net

[illegible]	[illegible]		[illegible]	[illegible]	
[illegible]	Lori		[illegible]	Bell	
[illegible]		Unit	May 15	May 16	May 17
		Rate	$40.00	$50.00	$50.00

Sub Total: $140.00
Tax (10.00%) – $14.00 – Fees ($12.50) – Total: $166.50

Bells Rings across the Pond Test Invoice

Special Request Text

MEXICO

Tipos de Cambio del Día

Today's Exchange Rate

Lunes, 2 de Noviembre del 2015

Monday, November 2, 2015

16.40

Bancomer

16.36

México

Este tipo de cambio es meramente informativo y no representa ninguna oferta de compra o venta de divisas. Para mayor información sobre nuestros tipos de cambio, favor de comunicarse a nuestra línea telefónica de tipos de cambio o vía correo electrónico a nuestra Casa de Cambio en el interior de la República. Este tipo de cambio es proporcionado por el promedio de tipos de cambio de instituciones financieras en el Distrito Federal.

This exchange rate is for informational purposes only and does not represent an offer to buy or sell foreign currency. For more information about our exchange rates, please contact your local Ria Financial Services office. This exchange rate is provided by the average of exchange rates of financial institutions in Mexico City.

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SQL Server Setup

Creating a merged (slipstreamed) drop containing SQL Server 2008 RTM + Service Pack 1

[Updated on April 7th, along with the availability of SQL Server 2008 SP1]

Today I am going to show you how to create new source media that will slipstream the original source media with SQL Server 2008 Service Pack 1. Once you have created this drop you can install SQL Server 2008 SP1 in a single step! These instructions are included with the Service Pack 1 release but there are some issues with the documentation that will be addressed in the next revision of the documentation. There is not a GUI user interface that indicates you are slipstreaming but there are a few clues - see at the bottom for screen shots.

These steps will take a little longer to perform than the steps for the basic slipstream described here but once completed you will be able to run a slipstream installation from the new drop on a test machine before deploying into production.

These instructions are for English SQL Server but will work with any language of SQL Server if you substitute the correct service package language.

1. Copy your original SQL Server 2008 source media to c:\SQLServer2008_FullSP1

2. Download Service Pack 1 from http://www.microsoft.com/Downloads/details.aspx?FamilyID=66dd3dbe-bf3e-4f45-9558-ccc6a4f9dc19. The three architectures of Service Pack 1 should be included. the package names are as follows:

   - SQLServer2008SP1-KB968369-IA64-ENU.exe
   - SQLServer2008SP1-KB968369-x64-ENU.exe
   - SQLServer2008SP1-KB968369-x86-ENU.exe

3. Extract the packages as follows:

   - SQLServer2008SP1-KB968369-IA64-ENU.exe /x:c:\SQLServer2008_FullSP1\PCU
   - SQLServer2008SP1-KB968369-x64-ENU.exe /x:c:\SQLServer2008_FullSP1\PCU
   - SQLServer2008SP1-KB968369-x86-ENU.exe /x:c:\SQLServer2008_FullSP1\PCU

Ensure you complete this step for all architectures to ensure the original media is updated correctly.

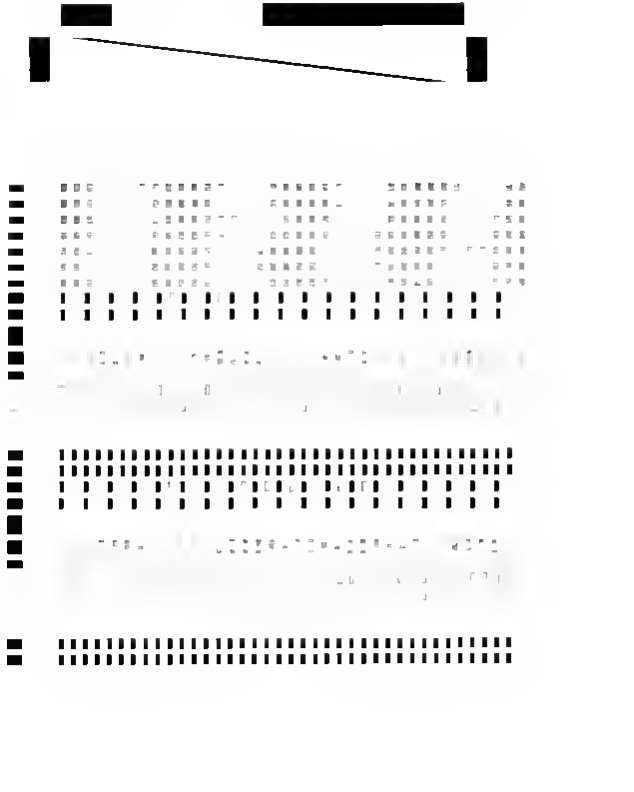
4. Copy Setup.exe and Setup.rll from the PCU extracted location to the original source media location:

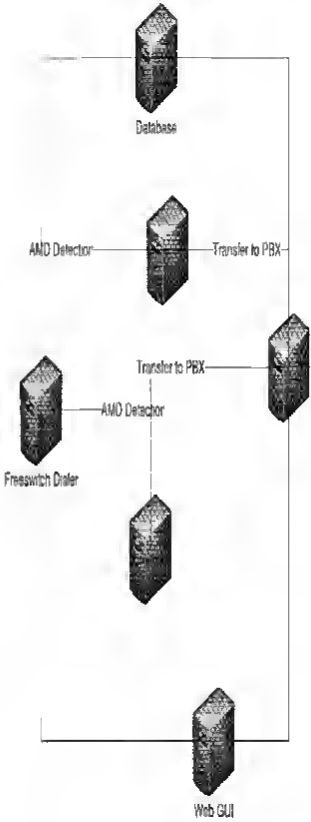
   - robocopy C:\SQLServer2008_FullSP1\PCU c:\SQLServer2008_FullSP1 Setup.exe
   - robocopy C:\SQLServer2008_FullSP1\PCU c:\SQLServer2008_FullSP1 Setup.rll

5. Copy all files and the folders **except the Microsoft.SQL.Chainer.PackageData.dll** in c:\SQLServer2008_FullSP1\PCU\<architecture> to C:\SQLServer2008_FullSP1\<architecture> to update the original files:

   - robocopy C:\SQLServer2008_FullSP1\pcu\x86 C:\SQLServer2008_FullSP1\x86 /XF Microsoft.SQL.Chainer.PackageData.dll
   - robocopy C:\SQLServer2008_FullSP1\pcu\x64 C:\SQLServer2008_FullSP1\x64 /XF Microsoft.SQL.Chainer.PackageData.dll
   - robocopy C:\SQLServer2008_FullSP1\pcu\ia64 C:\SQLServer2008_FullSP1\ia64 /XF Microsoft.SQL.Chainer.PackageData.dll

NOTE: If you accidentally copy the Microsoft.SQL.Chainer.PackageData.dll file, you may see this error when you launch Setup.exe. If this happens, restore Microsoft.SQL.Chainer.PackageData.dll back to the original version.




Database
AMD Detector
Transfer to PBX
Transfer to PBX
AMD Detector
Freeswitch Dialer
Web GUI

the other controls on the Home tab. Most controls offer a choice of using the look from the current theme or using a format that you specify directly. To change the overall look of your document, choose new Theme elements on the Page Layout tab. To change the looks available in the Quick Style gallery use the Change Current Quick Style Set command. Both the Themes gallery and the Quick Styles gallery provide reset commands so that you can always restore the look of your document to the original contained in your current template. On the Insert tab, the galleries include items that are designed to coordinate with the overall look of your document. You can use these galleries to insert tables, headers, footers, lists, cover pages, and other document building blocks. When you create pictures, charts, or diagrams, they also coordinate with your current document look.

You can easily change the formatting of selected text in the document text by choosing a look for the selected text from the Quick Styles gallery on the Home tab. You can also format text directly by using the other controls on the Home tab. Most controls offer a choice of using the look from the current theme or using a format that you specify directly. To change the overall look of your document, choose new Theme elements on the Page Layout tab. To change the looks available in the Quick Style gallery use the Change Current Quick Style Set command. Both the Themes gallery and the Quick Styles gallery provide reset commands so that you can always restore the look of your document to the original contained in your current template. On the Insert tab, the galleries include items that are designed to coordinate with the overall look of your document. You can use these galleries to insert tables, headers, footers, lists, cover pages, and other document building blocks. When you create pictures, charts, or diagrams, they also coordinate with your current document look. You can easily change the formatting of selected text in the document text by choosing a look for the selected text from the Quick Styles gallery on the Home tab.

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SAT® Request to Cancel Test Scores
Fax: 610-290-8978

Use this form only if you wish to cancel scores for the SAT or SAT Subject Tests™
Complete this form and give it to the room supervisor before you leave the testing room. You may cancel scores after you leave, but your request must be received no later than the Wednesday following your test day. If you are testing on a day other than the published administration date, check with the room supervisor for the deadline that applies to you.

Completing and submitting this form will cancel ALL scores for ALL tests taken on the day in question, except in the event that your calculator or CD player malfunctions while you are taking an SAT Subject Test in Mathematics or a Language with Listening Test. Only in the case of equipment failure will you be allowed to cancel scores for a single SAT Subject Test. You must have communicated the equipment malfunction to the room supervisor during the Mathematics Test or the Language with Listening Test.

Once we receive your cancellation request, we cannot reinstate your scores, and they will not be reported to you or to your designated institutions.

TEST-TAKER: PLEASE PRINT

Last Name _____ First Name _____ MI _____

Address _____ City _____

State _____ Country _____ ZIP/Postal Code _____

Registration Number _____ Date of Birth _____ Sex _____

Test Center Number _____ Test Center Name _____

City _____ State _____ ZIP/Postal Code _____

Please cancel my: _____ SAT _____ All SAT Subject Tests _____ Single SAT Subject Test (equipment failure)*

**I tested in: _____ October _____ November _____ December _____ January
_____ March _____ May _____ June _____ Other (give date)

Test-Taker's Signature _____ Date _____

* Request to cancel test scores for equipment failure must be signed by the room supervisor.
** If this is a makeup test, check the month you registered for.

IMPORTANT: SUPERVISOR ACTION REQUIRED FOR CANCELLATION DUE TO EQUIPMENT FAILURE OR SUDDEN ILLNESS

If this is a cancellation because of sudden illness or cancellation of a single SAT Subject Test score due to equipment failure, you must note this on the Supervisor's Irregularity Report (SIR) and sign by this action by signing below.

I noted this cancellation on the SIR _____ Supervisor's Signature* _____
[required for single Subject Test cancellation or sudden illness]

TEST-TAKER: If returned after test day, your request **must be received no later than 11:59 p.m. Eastern Time on the Wednesday** following your test day. If you are testing on a day other than the published administration date, check with the room supervisor for the deadline that applies to you. Fax your signed request to 610-290-8978, or send by overnight mail to: SAT Program, Score Cancellation, 1425 Lower Ferry Road, Ewing, NJ 08618.

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Test Fax

FROM WPA

LAW FIRM

Driver Log

DATE	TIME IN	TIME OUT	DSTN	NAME	DRIVER'S LICENSE	DOT#	LICENSE PLATE#	TRAILER IN	TRAILER OUT	SEAL #	PAPER WORK Y/N	#
												1
												2
												3
												4
												5
												6
												7
												8
												9
												10
												11
												12
												13
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												15
												16
												17

VA

American of Martinsville finishing area hit by fire

Wednesday March 10 2010
By DEBBIE HALL Bulletin Staff Writer

A fire Tuesday at American of Martinsville was an accident, according to Henry County s public safety director

Dale Wagoner said his office along with the Ridgeway Volunteer Fire Department Martinsville Fire Department and Stone Ambulance responded to the 11 34 a.m call at the Redd Level plant off Rives Road

The blaze started in the finishing department and was contained there Wagoner sa d

Sprinklers were activated and the company s fire brigade also worked to extinguish the blaze Wagoner said

"They did a good job with that," he said, adding that the quick effort "prevented any additional damage to the facility"

COLEY ELECTRIC & PLUMBING SUPPLY
1285 WEST PINE STREET
JESUP GA 31545
912 427 4985 Fax 912 427 8140

Quotation

06/24/13	S1478278
	1

SHIP TO
CARA COLEY
144 SKYLARK DR
JESUP GA 31545

6712

CARA COLEY

CARA COLEY | PK PICK UP | NET 10TH | 06/24/13 | NC

Ea	23.251	3140 02C VORTENS MURANO ADA COMMODE COMPLETE WHITE	151.49	151.49
		********** Alt Components **********		
		* 1 - 3140 02 VORTENS MURANO ADA HGT ELONGATED WHT *		
		* 1 - 3425-12 VORTENS MURANO 12" ROUGH TANK WHITE *		
		* 1 - 31194 DEEP WAX SEAT WITH HOOD *		
		* 1 - P1-20CL 20" FT-SET SUPPLY LINE POLY *		
		* 2 - 42E-PR CLOUK CUTER PLUMB PERFECT CLOSET BOLT *		
		* 1 - 1.28EC 000 WHITE ELONGATED COMMODE SEAT *		
		**********		
		TAXES NOT INCLUDED		

This is a Quotation

Subtotal 151.49
S&H CHRG 0.00

Amount Due 151.49

Loan-to-value (LTV) - which is the amount of the loan compared to the value of the house, based on the appraisal

Example, your house is worth $185,000, and the bank will loan up to 95% LTV, meaning they'll loan you up to $175,750.

Don't confuse the 'price' the house with the 'value' of the house. The bank gets the value of the house -- what they think the house is worth -- from the appraisal

---

Pests needs → Let him know ASAP

Email Kim Hunt

- Sellers disclosure
- Lead based paint disclosure
- Home owners exception.

Pests:

Shop for Home owners insurance policy
↳ have them call pests

- Check Liberty Mutual

MEMIC
MEMIC

Power pests
* Un Healthy phone #
* Email policy & copy of
* Credit report
* What is final exception which is located on the purchase agreement

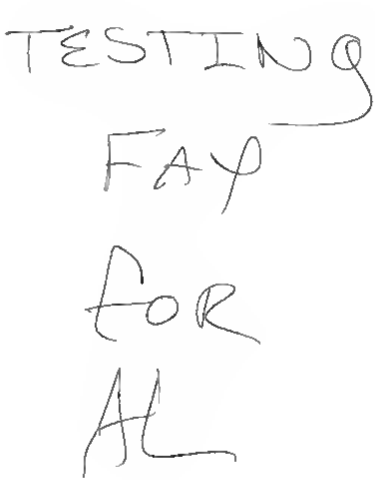
→ Bank (later) or seller (now)

Get a copy of the pests report prior to closing date

Gift Document

Donor
Letter has to be signed & dated
Donor had the funds at the time of the gift

Going to the lender
Process
* certified check or bank check
* Letter from bank stating that they


TESTING
FAY
FOR
AL

How are you it's so typical of me to talk about myself I'm sorry

This is a test fax

Hopefully this works

Thank you HP for helping

Test

How Can I Test My Fax Machine?

I just hooked up a new fax machine, and I'd like to test it, just to make sure it works. How can I do that?

Presumably you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both:

To test the send functionality of your fax machine, send a one-page fax to 1-855 330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

To test the receive functionality of your fax machine, point your web browser to FaxZero. This site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

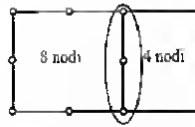


Fig. 1-16 Passaggio tra elementi di diverso ordine mediante l'utilizzo di condizioni di dipendenza

Chiaramente quanto riportato si può estendere anche ad elementi non piani, ma tridimensionali ad esempio gli assi adiacenti

586 294-7134

Fuse Technology Group, Inc
32123 Mitic | Fraser | MI 48026
P (248) 549-0800 F (248) 549-0888
www.fusetg.com

Hey Pam,

This is a test fax!

Kent

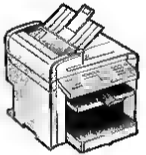
Dede
Fax
Test

DUMMY FAX DOCUMENT

NO CONTENT HERE

Canon

imageCLASS
MF4570dn



Startar Guide

English

Read this guide first
Please read this guide before operating this product
After you finish reading this guide, store it in a safe place for future reference.

Guide de démarrage

Français

Lisez ce guide en premier
Lisez ce guide avant d'utiliser le produit.
Une fois que vous aurez lu ce guide, stockez-le dans un endroit sûr pour pouvoir y revenir ultérieurement.

Guía de inicio

Español

Lea en primer lugar esta guía.
Lea esta guía antes de utilizar el producto.
Una vez que haya terminado de leer la guía, guárdela en un lugar seguro para consultarla en el futuro.

Manual do iniciante

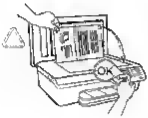
Português

Leia este manual primeiro
Leia este manual antes de operar este produto
Quando você terminar de ler este manual, guarde-o em um local seguro para referência futura

Third Page

TEST

Test
from
Baltimore



IMPORTANT!

You must scan this alignment page for best print quality.

STEP 1 Lift the lid. Place this alignment page face down on the right front corner of glass. Close the lid.

STEP 2 Press **OK**.

brother At your side. Registration Confirmation

Thank you for registering your Brother® Facsimile/Multi-Function Center® product

This is an automated reply confirming your Product Registration/Test Sheet has been received.

Thank you for purchasing a Brother® Facsimile or Multi-Function Center® product. We know there are many products available on the market today and thank you for choosing a Brother® product. We look forward to having you as our customer.

Should you have questions or need further information about your Brother® product, please refer to your User's Guide for the appropriate contact information.

CONFIRM0007LJC

This is a test!

This is what Medicaid is looking for

TEST

2:33pm

http://www.foodtv.com

Pan Roasted Chanterelle-Gorgonzola Stuffed Chicken Breast

Recipe Courtesy of Kent & Kevin Rathbun

2 ounces bacon fat
1 tablespoons garlic minced
1 tablespoons shallot, minced
2 ounces yellow onion, minced
4 ounces chanterelle mushrooms
1/2 cup white wine
4 ounces gorgonzola bleu cheese
1 tablespoon basil, chopped
1/2 tablespoon oregano chopped
Kosher salt to taste
Cracked black pepper to taste

For the pan roasted chicken breast
2 (12-ounce) Airline chicken breast, split into 4 skin on
1 teaspoon kosher salt
1 teaspoon cracked black pepper
8 ounces chanterelle mushroom-gorgonzola mix
2 ounces canola oil

For the chanterelle mushroom-gorgonzola stuffing

In a medium hot sautepan add the bacon fat and saute garlic, shallot and onions until translucent.

Add chanterelle mushrooms and continue sauteing until tender. Deglaze with white wine

Chill and set aside

In a medium mixing bowl and cool chanterelle mushroom mix, gorgonzola, basil, oregano, salt and black pepper. Fold together until incorporated. Chill and set aside for later use.

For the pan roasted chicken breast:

Preheat the oven to 350 degrees.

With a boning knife, butterfly 4 chicken breasts. Stuff each breast with 2 ounces of chanterelle mushroom-gorgonzola mix then tie with butchers twine to ensure that it stays together

Season each chicken breast with salt and cracked black pepper

In a large hot saute pan and canola oil then lay the chicken in the pan skin side down. Sear for about one minute then turn over and continue cooking for 30 more seconds.

Place the entire pan in a 350 degree oven and roast until done. Serve with onion jus immediately

Prep Time: 20 minutes

Re: Letter from Dr. Santos on behalf of the Estate of Jan Hochstim

The letter by Dr. Santos should parallel the letter which I sent previously from Richard Snowdy. It should describe Dr. Santos' relationship to my father, the nature and duration of my father's illness as well as the treatments (in general) he received, stating that as a result of these factors he was unable to gather and prepare the necessary information to file taxes for 2009 and 2010.

Please fax Dr. Santos' letter to: (305) 865-4188

Thank you,
Rich Hochstim
(305) 215-7973

YESTELECOM

Fax Test

Re: 281.394.3003

Shawn,

will you please call me at 281-705-8275.

Now, the internet isn't working after making the changes to the modem & router -

thank you,

Kim Hegner

WOO
KIES

Guttermaster

"the safe and easy way to clean your gutters"

INSTRUCTION SHEET

IMPORTANT WARNING: Be sure surrounding area is clear of Electrical Hazards See warning below

STEP 1:
Connect Guttermaster to garden hose

With Quick Connect

Attach Garden Hose as shown above

Without Quick Connect

Remove Quick Connect adapter from Handle

Attach to standard male garden hose connector

STEP 2
Adjust wand to desired length (See Ex. A) and lock in place by gently tightening the EZ Twist collar (See Ex. B). Do Not over tighten

STEP 3:
Turn on water source

Ex. A

Ex. B

STEP 4
Aim Guttenmaster to the area you want to clean.

STEP 5:
Turn water flow switch to "ON" position. Hold on tight as the water flow will cause a kick back action

Step 4

Step 5

CLEANING TIP
When cleaning gutters start 3 to 4 feet away from the down spout and flush debris toward the down spout. When that area is clean step back another 3 to 4 feet from your original position and work towards the down spout. Keep repeating this process until you have worked the entire length of the gutter

SURFACE CLEANING.
Attach optional brush attachment as shown
Repeat above steps

SPECIAL EVENT
JUNE 23 - JULY 5
DOWNSVIEW LOCATION ONLY

WARNING - ELECTRICAL SHOCK HAZARD!

This pole is not to be used on or near electrical wiring of any type. Keep at least 10 feet (3 meters) away from power lines. Do not touch or aim spray at electrical wiring of any type.

DO NOT operate from ladders or elevating devices of any kind. Operator must maintain both feet on solid ground.

Imported by/Importe par Showking Product Sales Ltd. Langley, B.C. Canada V1M 2A2 www.guttermaster.ca

Made in China

TEST

FAX

Miss Mick

KK - Gay-Gay

FAX

To: test
Company:
Fax: 8888771655
Phone:

From: Administrator
Fax:
Phone:
E-mail:

NOTES:

Date and time of transmission: Tuesday, January 31, 2012 10:14:48 AM
Number of pages including this cover sheet: 01

testPageFromIT

FAX TRANSMISSION

To: Dealing Department / Dealers	Fax: 001 8553 301239
From: [illegible] NAU	Date: 2 November 2015

Russ test Trade subject 2

There are a total of 4 trade(s) within this fax. Contact us if number received is different.

Invest Cash	Action	Ref	Fund	ISIN

Regards,

Authorised Signatory

FAX

To: test
Company
Fax: 15032001300
Phone

From:
Fax
Phone
E-mail

NOTES:

Test #1

Date and time of transmission: Friday, July 05, 2013 11:38:15 AM
Number of pages including this cover sheet: 01

HPD-54 (REV 4/99)
Page 3 of 3

THE CITY OF NEW YORK DEPARTMENT OF HOUSING PRESERVATION AND DEVELOPMENT

REQUISITION/PURCHASE ORDER FOR REPAIRS/SUPPLIES PRIORITY

Type of Order: (CODE) 34 Open Market Individual; 34 Open Market Lump; 34 Emerg 24hr; 34 Blanket; 34 Contract Spec Prof. Req
Check one Actions of Orig, Increase, Decrease, Cancel
B-R Fund: 001
Order Ln Dup Accy Code: 005
Date Approved:

VENDOR
Name: KHUSHI CONSTRUCTION Inc
Address: 149 STORY ROAD
New HYDE PARK, NY 11040
City State & Zip Code
Tel. No: 646 306 4316

ACCOUNTING INFORMATION

Agency Code	Budget Code	Object	Sub Object	Reporting Category	Total Order Amount
806	6278	005			

Action Of Bidder: Requested and Notified By: (Name) (Date)

Line	Qty. Ord.	Qty. Rec'd	Qty. Bkd	U.O.M.	Unit Cost	Bldg. No.	Lot No.	Bldg. No.	Alt.
1	X Man.				551	01708	0007	411	

Street Address: 411 EAST 114 STREET
Program: ERP REPAIRS
Tenant Name: STACEY MENZER
Tel. No.: (347) 513-2835
Apt. No.:
Apt. Key With:
Sept. Name:
Tel. No.:
Apt.:
Address:

Number of Units: Occupied: Vacant: Total: 20
Type of Inspection: X Emergency; Priority: 1; Non-Emergency; Permit Required:

INSTRUCTIONS: Furnish All Labor & Materials Required To Perform The Following Work. See Invoice For Bid For General Conditions. Submit Invoice* In Triplicate Along With The Completed Work Sheet Information Request Slip Copy No.3 To: 215-20 Linden Blvd, 6th Floor, New York, New York

VENDOR PLEASE NOTE: Start Date Must Be Established By HPD; Completion Date Established By HPD

ALL WORK UNDER THIS ORDER MUST BE DONE SAFE WORK PRACTICES.

DESCRIPTION:
Please See Next Page For Description Of This OMO

3 of 4

Invoices may not exceed contractor's estimate and must be submitted by an itemized list of time and material costs. When Bids only is specified by HPD on purchased order, time and materials shall not be required with invoice.

Initials of Person Entering: Page Total Amt.:

PAGE TOTAL AMOUNT $ 850.00

I certify that the items herein are needed and will be used for the purpose of maintenance of the above premises, which is consistent with the purposes stated on the budget/application or grant.

Prepared By (PRINT): AUSTIN
Lic. No.:
Phone No.: (212) 436-0867
Date: 3/24/14

Approved By (Assoc. PRM): AUSTIN
Director Approval: BLAGHEIM
Date: 3/24/14

CENTRAL MAINTENANCE USE ONLY

Approved By: Date:
Date Received: 3/24/14
Job Type: GC
Job Resp.: CMUPEN

HM, W.D., Inc.: Approved By: Date:
CMO No.: EE18061
FIU: NSP:

FINAL GC SIGN OFF	DATE	GC AMOUNT

1 PAGE <INCLUDING TH $ ONE>

TEST FAX

PLEASE IGNORE

YOU ARE RECEIVING THIS FAX BECAUSE ONE OR MORE OF OUR CUSTOMERS HAVE REPORTED ISSUES TO THIS NUMBER YOU MAY RECEIVE SEVERAL OF THESE 1 PAGE TEST FAX TRANSMISSIONS AS WE WORK TO RESOLVE THE ISSUE WE APOLOGISE IF YOU RECEIVE SEVERAL WE WILL DO OUR BEST TO KEEP THE QUANTITY TO A MINIMUM

NKTELCO SWITCHROOM

C/o Aaron

419 753 5000

TEST FAX

HELLO FROM

UTAH!

Captaris
RightFax

Sample library document
Sample library document
Sample library document
Sample library document

Sample library document
Sample library document
Sample library document
Sample library document
Sample library document

Sample library document
Sample library document
Sample library document
Sample library document
Sample library document

LOAN REQUIREMENTS

1. 1 month recent paystub
2. 2 months recent bank statements
3. 2013 and 2014 W2s
4. 2013 and 2014 Signed Federal Income Tax Returns
5. Copy of Mortgage Statement
6. Copy of Property Tax Statement
7. Copy of Hazard Insurance
8. Copy of ID and Social Security Card
9. Copy of Retirement Accounts

LOAN REQUIREMENTS

1. 1 month recent paystub
2. 2 months recent bank statement
3. 2013 and 2014 W2s
4. 2013 and 2014 Signed Federal Income Tax Returns
5. Copy of Mortgage Statement
6. Copy of Property Tax Statement
7. Copy of Hazard Insurance
8. Copy of ID and Social Security Card
9. Copy of Retirement Accounts

Google

Search

Save it
Bookmark it Send it Share it
View Google in
Hebrew Change
©1999 Google

UnitedHealthcare
MILITARY & VETERANS

Referral/Authorization Request Fo

Service requests should be submitted directly by registered providers at UHCMilitaryWest.com
Use this form only if online option is not available

Admission Type
- ☐ ER
- ☐ Direct Admit
- ☐ Elective

Fax completed form to UnitedHealthcare Military & Veterans at:
- ☐ 877-880-8369 Routine
- ☐ 877-880-8263 Urgent (Care needed within 72 hours)
- ☐ 877-578-2738 Inpatient

Anticipated Date of Service: _____

Service Type (Check one): ☐ Specialty Referral ☐ Outpatient (Medical/Surgical/Home Health) ☐ Inpatient (Acute, SNF or Rehab) ☐ DME

Beneficiary Information (Completion of **ALL** fields is **REQUIRED**)

Last Name	First Name	MI	Gender	DOB (mm/dd/yyyy)
Address: Street	Apt	City	State	ZIP Code
Contact Phone				

☐ Sponsor SSN OR
☐ DoD Benefits Number (found on back of ID card):

Diagnostic Information
(REQUIRED FOR ALL REQUESTS: Diagnosis codes, Episode of Care Name and/or CPT Codes. Reason for Requested Service)

Diagnoses (CD Code[s]) — Diagnosis Description

Episode of Care
(Use exact name from UHCMilitaryWest.com. Applicable only for Prior Authorizations. Episode of Care (EOC) only.)

Reason for Requested Service. Attach clinical notes

CPT 4 Code(s) / HCPCS Code(s)	# of Units.	CPT 4 Code(s) / HCPCS Code(s):	# of Units:

Attaching clinical notes provides sufficient information for military treatment facility review and supports medical necessity review if needed

Requesting Provider Information (Do not use group name) (Completion of **ALL** fields is **REQUIRED**)

Last Name	First Name	NPI #
Address: Street	State / City	State / ZIP Code
Office Phone	Office Fax	
Contact Name	Contact Department	

Servicing Provider (Check One) ☐ Physician ☐ Facility ☐ Agency ☐ Vendor

Last Name or Entity Name (Required)	First Name (Required for Physician)	☐ NPI ☐ TIN
Address (Required): Street	Suite / City	State / ZIP Code
Specialty (Required)	Office Phone / Office Fax	

Servicing Facility (Required if applicable) (Check One) ☐ Acute Inpatient ☐ Outpatient ☐ Skilled Nursing ☐ Observation ☐ Rehabilitation

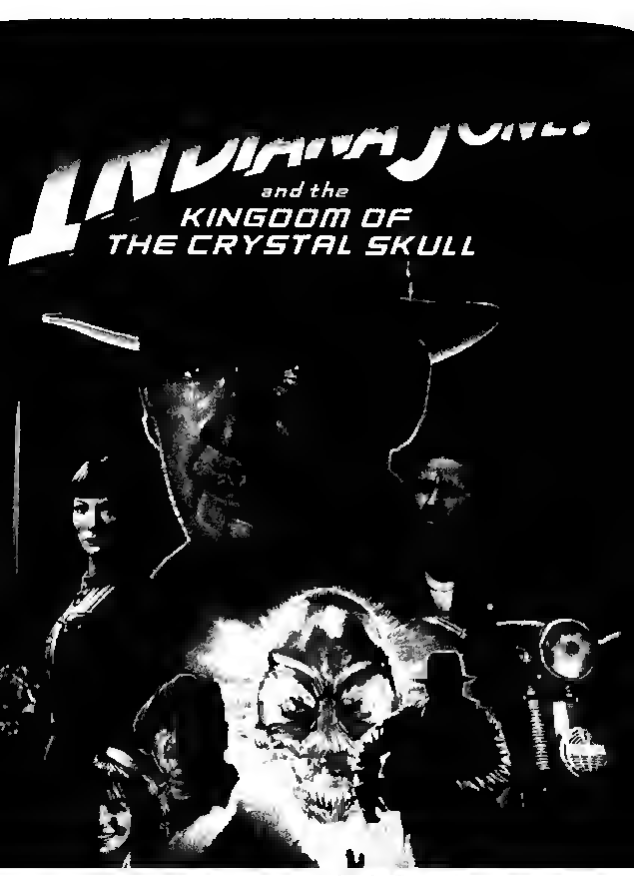
Facility Name	☐ NPI ☐ TIN
Address: Street / Suite / City	State / ZIP Code
Office Phone / Office Fax	

TRICARE West Region Customer Service: 877-988-5378 (WEST) For medical records released with your consent or to Authorized to our review specialists.
This document may contain personally identifiable, Sensitive, including protected health information. Only those with a need to know should access or use this document. Access use or disclosure of this document is to conform, must comply with the HHS Notice of Privacy Practices, the HIPAA Privacy Rule and the DoD Privacy Program. If you received this document in error, please advise the sender immediately (877-988-5378).
TRICARE is a registered trademark of the Defense Health Agency. All rights reserved. The Military Treatment Facility (MTF) is your first and best Point of Care Referral for this service.
Reference health network terms can be found at UHCMilitaryWest.com/Providers > Find a Form.
MVT1802_20210618 TRI

FACSIMILE COVER PAGE

To	**Fax#1-[redacted]-877 1665**	**From**	Andre
Sent	8/17/2010 at 5:0[illegible] 18 PM	**Pages**	1 (including Cover)
Subject			

TEST


and the
KINGDOM OF
THE CRYSTAL SKULL

STUDENT ABSENCE CALL IN SHEET

DATE	TIME	STUDENT NAME	GRADE	REASON	CALLED IN BY WHOM

confidential

fax

To	**fax5**
Fax Number	1 888 8771655
From	
Fax Number	
Business Phone	
Home Phone	
Pages	1
Date/Time	1/7/2011 9:46:43 AM
Subject	test2

---

tests

TEST FAX

ICTFAX

http://www.ictfax.org/

ICT Innovations
http://www.ictinnovations.org

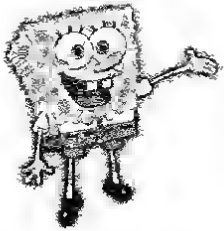
BACK OFFICE
TEST
FAX

1-855-330-1239

1-213-294-2943

TEST for Tay

1-888-877-1655



reaches the queue. If you don't receive an email in 10 minutes, there has been a problem with sending your fax and you should try again.

ADDRESS CHANGE NOTICE / AVISO DE CAMBIO DE DIRECCIÓN

Dear Brother Customer / Estimado Cliente de Brother:

Please be advised that effective December 2012 our corporate address will change from
Favor de tomar nota que a partir de Diciembre de 2012 nuestra dirección corporativa cambiará de

100 Somerset Corporate Boulevard
P.O. Box 6911
Bridgewater, NJ 08807-0911

To / A la siguiente

200 Crossing Boulevard
P.O. Box 6911
Bridgewater, NJ 08807-0911, USA

Please make note of the above information and direct any correspondence to us at our new address.
Thank you
Por favor tome nota de la información anterior y dirija toda correspondencia a su nuevo domicilio.
Gracias

Brother International Corporation

LX2984001

Printed in Malaysia

DUMMY FAX DOCUMENT

NO CONTENT HERE

Attached document
Attached document

Attached document

Attached document

Attached document

Attached document

Attached document

Attached document

1-888-877-1655

THIS IS JUST A TEST

Porting Authorization Form

The undersigned hereby authorizes Anveo Inc. to act as the responsible organization for the following phone number to initiate transfer/porting to Anveo.com local carrier. **PLEASE USE ONE FORM PER PHONE NUMBER**

Account number with your current provider:

Your Anveo account number:

First Name and Last Name
as shown in the invoice

Address as it appears on the account with the current provider:
as shown in the invoice

Authorized Contact Name (for business phone numbers):

Authorized Tel#

Phone Number to be ported

PIN Code (If porting a cell phone number):

Please select "Country" "Rate plan"

Select rate plan for the phone number to be ported
[illegible] For details

Per Minute	Personal Unlimited	Office Unlimited	Toll Free
☐	☐	☐	☐

☐ I already have Anveo phone number and want it with the number ported
[illegible]

List any additional phone numbers to be ported from the same provider below
Note: The phone numbers must be appeared on the attached invoice

1. **To initiate the porting process you must have:**
   - [illegible] copy of this Porting Authorization Form
   - [illegible] invoice from your current provider
2. **The invoice (screenshot) must show:**
   - [illegible]
   - [illegible]
   - [illegible]
   - [illegible]
   - [illegible]
3. **Initiate porting from Anveo dashboard: http://www.anveo.com/lnp.asp**

Country		Geographic Fee (USD)	Toll-Free Fee (USD)	Approx time (business
UNITED STATES	☐	$15	$15	25
CANADA	☐	$15	$15	15
AUSTRIA	☐	$53	$53	25
BELGIUM	☐	$24	$24	20
BRAZIL	☐	$50	$50	30
CROATIA	☐	$20	$20	30
CHILE	☐	$50		30
CZECH REPUBLIC	☐	$95		5
DENMARK	☐	$45	$45	30
DOMINICAN REPUBLIC	☐	$50		30
ESTONIA	☐	$29		20
GERMANY	☐	$181	$181	60
GREECE	☐	$39		20
HUNGARY	☐	$77	$77	5
ISRAEL	☐	$23		30
LITHUANIA	☐	$31		5
LUXEMBURG	☐	$77	$77	20
MEXICO	☐	$93		20
NETHERLANDS	☐	$40	$145	30
NEW ZEALAND	☐	$70	$45	30
NORWAY	☐	$46		8
POLAND	☐	$15		8
PUERTO RICO	☐	$35		25
ROMANIA	☐	$95		20
SLOVENIA	☐	$15	$13	5
SOUTH AFRICA	☐	$50		5
SPAIN	☐	$55	$35	5
SWEDEN	☐	$50	$200	8
SWITZERLAND	☐	$95		25
UNITED KINGDOM	☐	$79	$75	25

You can port your phone number in USA and Canada free of charge

SPECIAL OFFER. **Port a phone number in US and Canada for FREE to "Personal Unlimited" or "Office Unlimited" rate plan with 12 month pre-payment for the phone number**	☐	FREE	see above

* Terms and Conditions. Upon initiating porting process, your account will be charged a non-refundable porting fee according to the prices listed above. A porting process takes 3-6 weeks on average to complete, however in some cases it may take longer. You must maintain active service with your current provider until after the number is successfully ported to Anveo. The porting request may be declined/rejected by the losing carrier (your existing provider), Anveo or Anveo's carrier at any time during the porting process. You acknowledge and agree to hold harmless Anveo from and against any damages or liabilities of any kind related to the porting of a phone number. After the phone number is ported, your account will be charged the phone number setup fee and 12 month subscription according to the Anveo Phone number rate plan selected above. During the porting process our carrier might request some additional information and you agree to provide it in a timely manner, otherwise the porting request will be cancelled.

** Free Porting Specific Terms. When the FREE porting is complete the phone number will be pre-paid for 12 months and account will be charged a non-refundable $24 (12 x $2/month) for Personal Unlimited rate plan, or $48 (12 x $4/month) for Office Unlimited rate plan. If the porting request was not complete (for example you cancelled the request or you failed to provide information required to complete the porting in a timely manner) the regular $15 non-refundable porting fee will be charged.

AUTHORIZED SIGNATURE ____________________ **DATE** ____________

Please open this link: http://www.anveo.com/lnp.asp and attach the signed copy of this form and a copy of the latest invoice/bill statement from the current service provider for the phone number to be ported

THIS IS A FAXED MESSAGE FROM

WESTERN EXTERMINATOR COMPANY

SERVICE CENTER 6
13187 CENTER STREET
RIVERSIDE, CA 92507
(951) 369-1771

DATE_____ #PAGES (INCLUDE THIS SHEET)_____

TO (COMPANY) _____

ATTENTION _____

FAX# ( ) _____ FROM _____

IF YOU HAVE ANY DIFFICULTY RECEIVING THIS MESSAGE, PLEASE CONTACT OUR OFFICE AT (951) 369-1771 OUR FAX NUMBER IS (951) 369-0969

MESSAGES/COMMENTS

_____

_____

_____

_____

4 Project Approach

4.1 Project Lifecycle Processes

This is where the overall approach to the project is described, explaining how the work gets done. What is the overall approach to undertaking the project work? Is the project split into major phases? How are requirements being captured? Is there a prototyping activity before solidifying the requirements? What sorts of integrated and testing activities are there? For a management consultancy project what kinds of reviews will there be, and how will input be accepted?

4.2 Project Management Processes

This is a description of those processes used to manage and control the project. It is critical that this section at a minimum describes the formal process to control project changes. It could also include such things as the risk management process, and how performance information is captured and reported (which may be expanded on in the Communications Plan section later in this document).

4.3 Project Support Processes

This is a description of those processes that typically happen throughout the project lifecycle and support the various other activities. Often includes such processes as configuration management, release control, how the support infrastructure will be used, etc.

4.4 Organization

This section will benefit from the use of diagrams to explain the organizations and mapping.

4.4.1 Project Team

How is the project organized to accomplish work? Is there a formal project organization structure? If so, explain it.

4.4.2 Mapping Between <Organization> and Client

Show how your organization maps onto the client, and what occurs at each level of the mapping. For instance, in addition to a mapping between your project manager and the client's, there may be an executive mapping between the organizations, perhaps a project steering group with joint

 © 1999 Michael Cooper WESTFORD CONSULTING

TEST

FAX

[redacted]

PHONE: [redacted]

tient Name	[redacted]	Patient DOB	02/11/1934
ender	Male	Appointment Date	09/06/2016,10.25 AM
ovider	[redacted]	Type of Visit	EOV
ferring Provider	MOSCH GEORGE MD	Location	GEORGE C. MOSCH II, M.D.

ERGIES — No known allergies

ALS

Height	5 Feet 8 Inches 0r	68 in	172 72 cm
Weight	171 lbs	77 57 kgs	171 lbs0 er
BMI/BSA	25.92 / 1.92		
BP	Sitting 146/67 ,		
Pulse Rate	76 bpm		
Resp Rate	18 rpm		
Pulse Ox	94 %		

ESSMENT

Diabetes, II, c complications E11.8
Personal history of skin cancer Z85 828
Elevated PSA R97 2

ATMENT PLAN

99215
4040F
G8427
3268F
1100F
G8482
3045F 7 5%
Onsent Inuel Toujea
You will take N insulin before breakfast and
before supper
R IO in 8 weeks.
Continue to record lnr morning and before supper
Accu Cheks bring these with you with each visit
1 or 2 days before your next visit bring your glucometer
In to have it checked aga nst fasting blood sugor done
at the reference lab
Get FBS one or 2 days before next visit
*
N INSULIN INSTRUCTIONS
Accu-Cheks. Check blood sugar before
breakfast (i 05) and before supper (a.c supper)
Begin N insulin at 18 units before breakfast and
before supper
If A M. Accu-Chek is > 130 Increase before supper
N insulin by 2 units
If before supper Accu -Chek is > 130 increase
A M N insulin by 2 units
Remember that you increase the OPPOSITE insulin
In response to a high Accu-Check reading.
Keep increasing these levels day by day Do not go
back to previous levels.
Try to get all sugars between 80 and 140
If either F BS or a.c. supper Accu-Cheks begin to

TEST

WINDEMULLER

Date 9/30/14	
Regarding Exam Application	
To Bicsi	From: Joy Minidis
Phone.	Phone. (616) 877-8770
Fax No: 813-971 4311	Fax No (616) 877 8700
Number of Pages (Including Cover Sheet): 6	

Message

Please send credit card receipt to Member and also a copy to jminidis@windemuller.us

Thank You

TEST

Monday, April 22, 2013

Reservation Confirmation
[illegible]
Confirmation # 422 2013 1111111 0007

Dear Guest Valet,

We have received your reservation request. At this time, the property has not finalized their reservation. Confirmation will be sent. If you have any questions regarding your reservation, please contact our reservations department at [illegible] or email us at [illegible].

Thank You
The Management

Guest Information
To ensure a smooth check-in, we suggest that you bring the guarantee credit card information you used to make your reservation with you. For your personal security purposes.

Booked by	Sample, Anonymous	Status	Unconfirmed
Address	[illegible]	City, State	[illegible]
Email	[illegible]	Country	[illegible]
Email Address	[illegible]	Telephone Numbers	[illegible]

Reservation Description

Confirmation	Yes	Reservation Type	[illegible]
Confirmation #	1111111	Group Code	[illegible]

Reservation Details

Arrival Date	[illegible]	Number of Nights	[illegible]
Check-In Time	April 22, 2013	Check-Out Date	April 23, 2013

Room Rate Information	Rate Summary

Rate Name	Sample	Rate Code	[illegible]
Room Charges	Date	Rate	
	[illegible]	[illegible]	

Subtotal: [illegible] CAD
Tax (11.000%): $ 2.1 Total: $ 21.10

Notes: Please let us know if you have any special requests.

Cancel Reservation
If you would like to cancel your reservation, please click on the following link: [illegible]. Please note that cancellations after [illegible] will be charged a fee of [illegible].

(888) 877-
1655

$$\frac{x^2}{x^2+9} + \frac{1}{x^2+9}$$

TEST

QA
Test
Only

]]]]]]]

fax protocol pass-through g711ulaw

Simply Mad

Date. 2016-May-18
Page. 1 of 1

FAX

Mad Systems Inc
733 N Main St
Orange, CA 92868
714-259-9000
www.madsystems.com

FROM: **Serguei Kozlovski**
714-259-9001
714-259-9000 ex 654
serguei@madsystems.com

FOR: **toyfax**
18553301239

MESSAGE:
test from Bill.

Prayer to St. Joseph over 1900 years old

O St. Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place in you all my interests and desires. O St. Joseph do assist me by your powerful intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ, Our Lord; so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers. O St. Joseph, I never weary contemplating you and Jesus asleep in your arms. I dare not approach while He reposes near your heart. Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath. St. Joseph, Patron of departing souls, pray for us. Amen

Say for nine consecutive mornings for anything you may desire. It has seldom been known

to fail.

This prayer was found in the fiftieth year of Our Lord Jesus Christ. In 1500's it was sent by the Pope to Emperor Charles when he was going into battle

Whoever reads this prayer or hears it or carries it, will never die a sudden death, nor be drowned, nor will poison take effect on them. They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle.

Make this prayer known everywhere

Imprimatur
Most Rev. George. W. Ahr
Bishop of Trenton

Back to Et Cum Spiritu Tuo

Test it!

FAX TO: ~~[illegible]~~ 1655

503.200-1300

Hello Ken

This is A TEST FAX

To See if FAX MACHINE IS

WORKING —

AND Please FAX BACK

If a Problem Thanks

Ken

This is
a test Fax

TEST

FAXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

1-888-877-1655

FAX

TEST

JERRY

SC

1-855-330 12 35

Fax Call Report

HP LaserJet M4345 MFP Series

Fax Header Information

Job	Date/Time	Type	Identification	Duration	Pgs	Result
0	1970-Jan-0 2:58 AM	sent	[illegible]	8:07	6	Other Fax Error 3

TEST

GRENACHE

- Characteristics: **Med bodied, med acid, med tannin**

Black Tea Leaf

Dried Tobacco Leaf

Warm Climates

Hot Climates

Other

Aging/ Bouquet

broadvoice™

Test Facsimile

Subject: Test Fax

Total Pages Including Cover: 1

Hello,

This is a test fax sent for the purposes of isolating issues with faxing features. Please report any errors that may appear

Thank you

TESTING FAX MACHINE

08-01-09

1st tuner

Analog source setup:
Set up analog tuner, tv tuner as source, comcast ramsey cable ready tv - white bear lake, extended basic service
You should now see one source.

1st tuner Digital Source setup
Add new source using same half of the tuner, digital tv tuner as source, comcast ramsey cable ready tv - white bear lake, extended basic service, copy channel lineup don't scan for channels
You should now have two sources

had only digital tuning, went to the analog tuner and did a scan for channel updates. Then had digital and analog

2nd tuner
Analog source setup
Set up analog tuner, tv tuner as source, comcast ramsey cable ready tv - white bear lake, extended basic service.
Use same lineup as other tuners not copy
You should now see three sources

Digital Source setup
Add new source using same half of the tuner, digital tv tuner as source, comcast ramsey cable ready tv - white bear lake, extended basic service, copy channel lineup
You should now see four sources

Fax Answers

Resources to your questions about faxing

» How to Stop a Caller from a Fax Machine?
How to Fix Vertical Stripe On Faxes I Send »

How Can I Test My Fax Machine?

I just hooked up a new fax machine, and I'd like to test it, just to make sure it works. How can I do that?

Fax Send Online Free
Send & Receive Faxes Through Email. Daily $$$/Month. Get a 30 Day Trial!
www.mpfax.com/mailfax

Internet Fax $3.99/Mo
Email & Receive Fax with Internet Free Trial, No Set up, No Software
www.j2sky1.com/Free-Trial

Fax via Email
Over 27 million members use eFax to fax, mail your number faster
www.eFax.com

Email Free Fax
Find more properties/options for Email Free Fax
www.realcarrier.com

Ads by Google

Presumably you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both.

To test the send functionality of your fax machine, send a one-page fax to 1-888-877 1455 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax.Tor — if a fax web site that displays whatever is faxed to that number. Within a minute, your fax should appear on that site. Click the thumbnail to see a large version.

To test the receive functionality of your fax machine, point your web browser to FaxZero, the site lets you send faxes for free to anywhere in the United and Canada. Within a few minutes, your fax machine should ring — hopefully it will automatically answer and spit out the test fax.

Smartfax - $6.95/mo
Send & Receive Faxes by Email. Toll Free/Local 30-Day Free Trial.
www.smartfax.com/Free_Trial

Email Fax Number
Email Fax Number subscribers. Faxing simply and easily
www.activfax.com

2011 Free Internet Fax
Free Internet Fax - The Best Deals. #1 Computer Selections & Trends!
thebestdeals.freeinternet.com/

Ads by Google

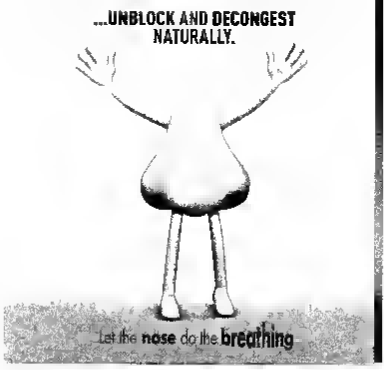
This article is filed under Fax Machines.

Fax Answers is Copyright 2001-2011 by Stewart Publishing, Inc. Friends Privacy (EOE)

Cholesterol Crusher Blast!

Reduce cholesterol the natural way with this tasty concoction!

- 1 cup of water
- 1 cup frozen blueberries
- 1/2 banana
- 1/3 cup cooked oatmeal
- 10 almonds
- 2 tbsp raw cacao
- 2 handfuls kale


...UNBLOCK AND DECONGEST
NATURALLY.
Let the nose do the breathing

Fax Transmittal

256 Iroquois Avenue
Lancaster, New York 14086

Phone: 716 681 1315
Fax: 716 683.5502
E-Mail:
fantasia@fantasiadesign.com
www.fantasiadesign.com

Date: _____

Number of Pages (including this sheet): _____

To: _____

Company: _____

Fax Number: _____

Phone Number: _____

From _____

Phone: _____

Notes:

Hey
You

TRANSMISSION VERIFICATION REPORT

TIME	12/22/2016 19:15
NAME	
FAX	8556355364
TEL	8886355367
SER.#	U63274M4J067620

DATE,TIME	12/22 19:14
FAX NO /NAME	18655464275
DURATION	00:00:18
PAGE(S)	01
RESULT	OK
MODE	STANDARD ECM

213-294-
2943
855-330-1239

Test Fax

Department of Labor IDOL

State of Illinois

Your Rights Under Illinois Employment Laws

ILLINOIS MINIMUM WAGE

$7.75 PER HOUR	$8.00 PER HOUR	$8.25 PER HOUR
Beginning July 1, 2008	*Beginning July 1, 2009*	*Beginning July 1, 2010*

Minimum Wage & Overtime

- **Coverage:** Applies to employers with 4 or more employees. Certain workers are not covered by the Minimum Wage Law and some workers may be paid less than the minimum wage under limited conditions. For more information visit our website
- **Tipped Employees:** Must be paid at least 60% of the applicable minimum wage. If an employee's tips combined with the wages from the employer do not equal the minimum wage, the employer must make up the difference.
- **Overtime:** Most hourly employees and some salaried employees are covered by the overtime law and must be compensated at time and one half of their regular pay for hours worked over 40 in a workweek

Hotline: 1-800-479-3998

Unpaid Wages

Wage Payment and Collection Act

- Employees must receive their final compensation, including earned wages, vacation pay, commissions and bonuses on their next regularly scheduled payday.
- Unauthorized deductions from paychecks are not allowed except as specified by law.

Phone: 312-793-2800

Equal Pay for Equal Work

Equal Pay Act

Requires employers to pay equal wages to men and women who do the same or substantially similar work, unless such wage differences are based upon a seniority system, a merit system, or factors other than gender.

Hotline: 1-800-EPA-IDOL

Domestic or Sexual Violence Leave

Victims' Economic Security and Safety Act

Provides employees who are victims of domestic or sexual violence, or who have family members who are victims, with up to 12 weeks of unpaid leave during a 12-month period.

Phone: 312-793-6797

Meal and Rest Periods

One Day Rest in Seven Act

- Provides employees with 24 consecutive hours of rest each calendar week
- Employers may obtain permits from the Department allowing employees to voluntarily work seven consecutive days
- Employees working 7 ½ continuous hours must be allowed a meal period of at least 20 minutes no later than 5 hours after the start of work.

Phone: 312-793-2800

Child Labor

Workers Under Age 18

- Children under the age of 14 may not work in most jobs, except under limited conditions.
- 14 and 15-year-olds may work if the following requirements are met:
  - Employment certificates have been issued by the school district and filed with the department of Labor confirming that a minor is old enough to work, physically capable to perform the job, and that the job will not interfere with the minor's education.
  - The work is not deemed a hazardous occupation (a full listing can be found on our website).
  - Work is limited to 3 hours per day on school days, 8 hours per day on non-school days and no more than 6 days or 48 hours per week.
  - Work is performed only between the hours of 7 a.m. to 7 p.m. during the school year (7 a.m. to 9 p.m. June through September) and
  - A 30-minute meal period is provided no later than the fifth hour of work.

Hotline: 1-800-645-5784

This is a summary of laws that satisfies Illinois Department of Labor posting requirements. For a complete text of the laws, visit our website at: www.state.il.us/agency/idol

For more information or to file a complaint, contact us at:
160 N. LaSalle St. Suite C-1300, Chicago, IL 60601
Chicago 312.793.2800 • Springfield 217.782.6200 • Marion 618.993.7000

THIS POSTER MUST BE DISPLAYED WHERE EMPLOYEES CAN EASILY SEE IT.

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FAX TRANSMISSION

edgarg

To Dealing Department / Dealers	Fax 001 8553 301230
From the NAI	Date 2 November 2015

Russ test Trade subject 2

There are a total of 1 trade(s) within this fax. Contact us if number received is different

Invest Cash	Action	Ref	Fund	ISIN

Regards

Authorised Signatory

TEST

pg

this

Fax Toy

Rocks

Terre-Alta Survey Services

- EDMONTON, ALBERTA
- PRINCE ALBERT, SASKATCHEWAN

test

Xerox WorkCentre 3220/DN Laser Printer (3220-DN) - Online Only

Model # 3220/DN | Web Code: [illegible] | See more XEROX products

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Qty: 1 Online

In Stock: Usually ships next business day

Online Quantity: 10

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Order online and pick up in store. Details >
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Tweet 0 Like

Recommended Accessories

$8.99

$9.99

Specifications

Printer	
Print Technology	Laser
Total Toner Cartridges	1
Total Print Heads	Not Applicable
Print Speed - Black	0.5 Sec.

Test
Floor 6

Wednesday, February 28, 2007

Reservation Confirmation
01101
Check-in: 03/09/2007

Dear Big Point,

Thank You
Reservations

Guest Information			
Reservation for:	Name	Date	Activity
Children:	#	Age	Total
Time:	AM	Duration	1 HOUR
Pick Up Location:		Return Pick Up:	

Meeting Point			
Check-in Time		Pick Up Time	2:00 PM

Payment Details			
Vacation of Hawaii		Sunday, [illegible]	
Tax & Fee	Price: [illegible]	Grand Total:	[illegible]

Activity Details			
Activity:	[illegible]	Adult Rate:	[illegible]
Activity Details	Price	Total	
	[illegible]	[illegible]	
Sub-Total:	[illegible]		
Tax: [illegible]	[illegible]		

Cancellation Policy:
We have a 72 hour Cancellation Policy. [illegible] cancel your booking [illegible] prior to your activity date. If you cancel past the expiration of the Cancellation Period or you fail to show up, a no show charge will be levied on your credit card like the flight you have and there. We really need at least half on all. We like this

CREATIVE PARK

You have the Adobe Reader software installed correctly!

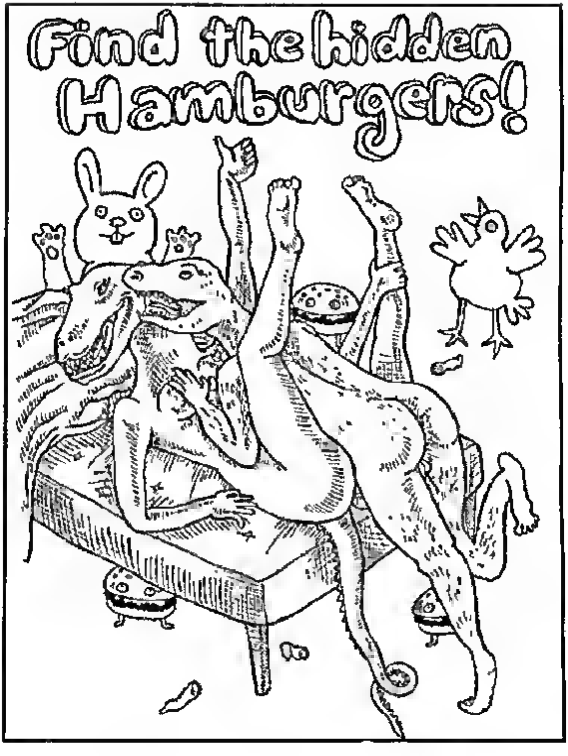
DUMMY FAX DOCUMENT

NO CONTENT HERE

****
*** ERROR TX REPORT ***
****

INCOMPLETE TRANSMISSION

TX/RX NO	0018
DESTINATION NUMBER	16884732963
DESTINATION ID	
ST. TIME	01/01 00:17
COMMUNICATION TIME	00'44
PAGES SENT	0
RESULT	NG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Please visit http://www.sdk.com/ for more information
limited demonstrational version
Please visit http://www.sdk.com/ for more information

FAX
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To:
From: Yesaha
Subject: testing email
Message: testing com
...
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Company Name
Address
Tel/ Fax:
Email /Website:

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This fax was sent with GFI FaxMaker fax server. For more information, visit: http://www.gfi.com

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Message :

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From: Harris Jerald	To: Test
Date 7/30/2012	Page(s): 1

Work yw piece

of Crap . . . .

ARG

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HP Officejet Pro 8600 N911a Series

Fax Test Report for
Apple Construction
7183271570
Nov 27 2012 8:59PM

Fax Hardware Test	PASS
Fax Connected to Active Telephone Wall Jack	PASS
Phone Cord Connected to Correct Port on Fax	PASS
Using Correct Type of Phone Cord with Fax	PASS
Dial Tone Detection	PASS
Fax Line Condition Test	PASS

Your HP device has passed the fax test.

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

Language	English
Country/Region	USA
Auto Answer	On
Rings to Answer	6
Fax Paper Size	Letter
Tone or Pulse Dialing	Tone Dialing
Fax Sound Volume	Soft
Distinctive Ring	All Rings
Busy Redial	Redial
No Answer Redial	No Redial
Automatic Reduction	On
Backup Fax Reception	On
(ECM) Error Correction Mode	On
Fax Speed	Medium (14400)
Fax Forwarding	Off

Refer to your User Guide for more information on the fax test and settings.

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Step 2. Choose the "Tools" menu
Step 3. Choose the "Run Fax Test" item

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Date 1/13/2015

To. 213-294-2943
From TestMan

Subject Test Subject

Hallo Peeps

SBA

FOR INFORMATION CALL

Shi

SERVICE STATION TRACKING NUMBER

SHARANYAS hgmentefEhkwFdpE0IEXEyfnl

11/21/2013

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EWR IPX

Corporate Headquarters, 221 Crossways Park Dr

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SHIPPER 123

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9170110383

RECEIVER 999

TestReceiver
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2159530193

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BILLING TO ——— SHIPPER

ShipperTest

DELIVERY INSTRUCTIONS: Will D by 10/01/2013

Test Special Inst ructions

PIECES DESCRIPTION WEIGHT DIMENSIONS
LENGTH WIDTH HEIGHT

Must Deliver No Later Than 09/01/2013

RECEIVED FREIGHT IN GOOD ORDER

RECEIVER'S SIGNATURE _____

PRINT RECEIVER'S NAME _____

TELEPHONE NUMBER _____

DATE TIME

SHARANYAShi hgmentefEhkw FdpE0IEXEyfnl

TRACKING NUMBER

TOTAL CHARGES

FAX

To: **Bacon**
Company:
Fax: 18553301239
Phone:

From.
Fax:
Phone: 90740
E-mail: Alex.Hall@ifhi.com

NOTES:

test fax from fundal

Date and time of transmission: Friday, June 10, 2016 11:38:26 AM
Number of pages including this cover sheet: 01

[illegible] TX REPORT [illegible]

[illegible]

TRANSMISSION OK

TO/FAX NO. 1271
[illegible] 8 9979 9246
DESTINATION ID
ST. TIME 13:04 4 18
TIME USE 0:30
PAGES SENT 1
RESULT OK

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TO _____

DATE _____

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Message:

TEST

*** TRANSMISSION REPORT ***

JAN 22,2008 8:28 Model 8 ABC Series 302-942-9677

START TIME	SENT TO	PAGES	RESULT
08:24	13105182071	8	Send Error

1-25-18

Test

~~4:29 PM~~

~~4:34 PM~~

4:38 PM

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GO!

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TO _____ COMPANY _____

FROM _____ DATE: _____

FAX: _____ PAGES _____

MESSAGE: _____

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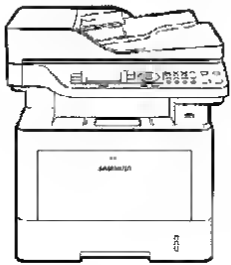

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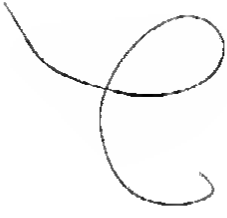

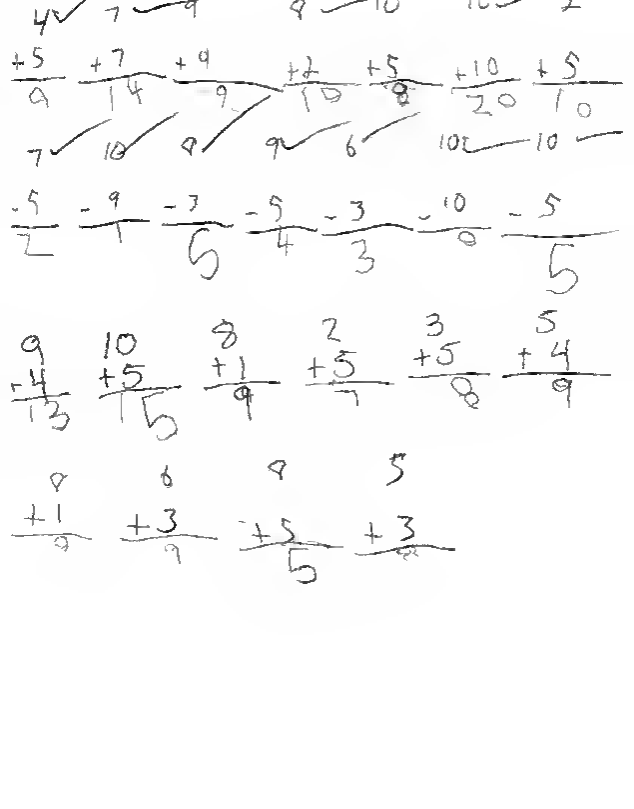

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DATE	TIME	NAME	REFERRAL SOURCE

[illegible]					
[illegible]	[illegible]		[illegible]	[illegible]	
[illegible]		[illegible]	[illegible]	[illegible]	[illegible]
		[illegible]	[illegible]	[illegible]	[illegible]
[illegible]			[illegible]		

[illegible]

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and the
world
knows it.

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1-855-330-1239

Cisco fax test

Wednesday March 12 2014

For BHALU BEAR INN HOTEL S[illegible]
Fax: +1(888)-877 1655
Attn Ajosh Chandran
Subject Booking Confirmation

Modify Reservation Confirmation
2SC13030 1466-285
Created: 03/12/2014 09:14.34 GMT

Dear Ajosh Chandran,

We have received the following reservation for your property and are transmitting this Reservation Confirmation via facsimile. If you have any questions regard ng this reservation please contact our Reservation Support Team at Tel: 1-800 707-6987 or Email:support@insight.com

Thank You
INSight.com

Modification Details

ModifId Number : Rooms from 2 to 1
Modified Room Type from Bhalu Queen Suite to Bhalu Queen Suite
Old Room deleted Pradi an Standard Hand cap

GUEST INFO

It s your obligation to safeguard this fax and keep this guest's credit card information secure in accordance with your internal security procedures

Booked by	Test Test	State:	Test
Address	Kiglijh	Zip code:	56756
City:	Test	Country	YEMEN
Email Address:	test@sol.com	Telephone Number:	09865899

BILLING INFORMATION

Credit Card	Xxxx	Expiry Date	xxxx-xx
Credit Number	xxxxxxxxxxxx	Grand Total:	$ 152.50

ROOM DETAILS

Number of Rooms:	1	Number of Nights:	1
Check In Date:	March 12, 2014	Check Out Date:	March 29, 2014

Room: 1 Bhalu Queen Suite Adults: 2 Children: 4

First Name	Test	Last Name	Test
Room Details	Rates	Mar 12	
	Rates	$ 125.00	

Sub-Total: $125.00
Tax [10.00%] $12.50 + Fees($15.00)= Total: $ 152.50

Note :Rates include Extra Person/Child Fees

Special Request: nf

Thanks for selecting INSight.com as your partner

HOW TO ORDER REPLACEMENT PARTS

What Are the Advantages of Attending A Career College?

The Advantages of Attending a Career College

There are many educational choices for this year's crop of graduating seniors. Traditional colleges, both four-year colleges and community colleges, are welcoming lists and lists of applicants for students. Long times to graduate, waiting lists for popular programs, or outdated curriculum for modern careers are all compelling reasons to seek other courses of education.

Indeed...only 30% of students who enter a four year college actually graduate. Of those who do graduate... large portions don't even find work in their chosen field. On the other hand, career colleges offer specific training for some of the "hottest" jobs available like nursing, dental hygiene and a wide range of technical and computer jobs. Let's look at three perceived disadvantages a career college has over traditional schools.

Prestige

With such a current emphasis on college attendance and the competitive lengths some high school students are willing to take to get into top schools, some recent graduates may consider choosing to attend a career college as settling. This is not necessarily the case. Why are you going to college? Ideally the answer is to get an education, learn a profession and be able to provide for your future.

A career college does all these things, in less time than traditional schools. Most career college graduates usually make a higher starting wage as well, depending on their degree. When you look at the choice pragmatically, one may ask the question, "Why don't more high school graduates choose a career college?" One thing to make sure of before you enter any school, whether or not it is accredited by the national governing body, especially if your profession requires licensing like nursing or dental hygiene.

Expenses

When you compare tuition prices with a community college or junior college with that of a career college, you may wonder how you can justify the vast discrepancy. Once you consider the limited availability of spaces in top in demand programs, it becomes easier to justify the cost. For instance nursing schools, dental hygiene schools and other "hot" careers have long wait times to even gain entry.

While these wait times often shorten up, it still may be years before you get into the program. Meanwhile, career colleges have much shorter wait times, or no wait times at all. If you consider the lost earnings of a dental hygienist during the three year wait period, it becomes much easier to justify the higher tuition. Indeed it would cost more over the long run to attend the community college!

Social Life

One of the big reasons graduating seniors go to college is because it allows them some freedom and independence for the first time in their lives. There are few things that compare to the feeling of living on a college campus your freshman year. While career colleges don't typically offer that experience...they do offer many social activities other colleges do not like political and professional associations.

People have a tendency to make friendships and form bonds no matter what the environment is. If you really want to "spread your wings" and get away from home, move out of your parent's house and get some roommates. If you need distance, attend a career college in a different city or state.

The bottom line is career colleges offer many distinct advantages over traditional schools. Relevant education, limited wait times for enrollment and shorter times to graduation are all great benefits. Don't let the perceived disadvantages of a career college derail you from a bright future www.top-colleges.com

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Maggie 2....

- 708-877-1455

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Test Fax from Westley

Test

Fax

What does The Fox say?

Testing Fax WITH Regional Code

++++++---------++++++

FAX TEST! THE FOX IN IN THE HEN HOUSE! FAX TEST! THE SHOE HAS FALLEN! FAX TEST!

Selection: UV170

Subpoint #	Name Suffix	Value	Status	Priority
TEC System Name UV170		Descriptor		
0	UV170	( )	-N-	NONE
1	UV170 CTLR ADDRESS	(19.0)	-N-	NONE *
2	UV170 APPLICATION	(2281.0)	-N-	NONE *
4	UV170 ROOM TEMP	71.0 DEG F	-M-	OVRD *
5	UV170 HEAT COOL	HEAT	-N-	OVRD *
6	UV170 DAY CLG STPT	(74.0 DEG F)	-N-	NONE
7	UV170 DAY HTG STPT	(70.0 DEG F)	-N-	NONE
8	UV170 NGT CLG STPT	(82.0 DEG F)	-N-	NONE
9	UV170 NGT HTG STPT	(65.0 DEG F)	-N-	NONE
10	UV170 OADPR MINPOS	(14.8 PCT)	-N-	NONE
11	UV170 RM STPT MIN	(55.0 DEG F)	-N-	NONE
12	UV170 RM STPT MAX	(80.0 DEG F)	-N-	NONE
13	UV170 RM STPT DIAL	(73.5 DEG F)	-N-	NONE
14	UV170 STPT DIAL	(NO)	-N-	NONE
15	UV170 DISCH TEMP	(74.5 DEG F)	-N-	NONE
16	UV170 1 VLV HTGCLG	(NO)	-N-	NONE
17	UV170 PSF MODVALVE	(VALVE)	-N-	NONE
18	UV170 WALL SWITCH	(NO)	-N-	NONE
19	UV170 OI OVRD SW	(OFF)	-N-	NONE
20	UV170 OVRD TIME	(0.0 HRS)	-N-	NONE *
21	UV170 NGT OVRD	(NIGHT)	-N-	NONE
22	UV170 AUX NORUX	(NORUX)	-N-	NONE
23	UV170 FREE CLG	(DISABL)	-N-	NONE
24	UV170 DI 2	(OFF)	-N-	NONE
25	UV170 DI 3	(OFF)	-N-	NONE
26	UV170 LOW TEMP DET	(OFF)	-N-	NONE
27	UV170 ELEC NOELEC	(NOELEC)	-N-	NONE
28	UV170 PSF 2PSVCTL	(DISABL)	-N-	NONE
29	UV170 DAY NGT	DAY	-N-	OVRD
30	UV170 WRMUP COOLDN	(OFF)	-N-	NONE
31	UV170 AOV1 SPAN	(10.0 VOLTS)	-N-	NONE
32	UV170 AOV1 START	(0.0 VOLTS)	-N-	NONE
33	UV170 AOV2 SPAN	(10.0 VOLTS)	-N-	NONE
34	UV170 AOV2 START	(0.0 VOLTS)	-N-	NONE
35	UV170 AOV3 SPAN	(10.0 VOLTS)	-N-	NONE
36	UV170 AOV3 START	(0.0 VOLTS)	-N-	NONE
37	UV170 AO DIR REV	(4.0)	-N-	NONE *
38	UV170 AOV1	(1.48 VOLTS)	-M-	NONE
39	UV170 AOV2	(0.0 VOLTS)	-N-	NONE
40	UV170 AOV3	(10.0 VOLTS)	-N-	NONE
41	UV170 AUX RAO	(OFF)	-N-	NONE
42	UV170 DO 2	(OFF)	-N-	NONE
43	UV170 NTG 2POS VLV	(OFF)	-N-	NONE
44	UV170 CLG 2POS VLV	(OFF)	-N-	NONE
45	UV170 ENHEAT 1	(OFF)	-N-	NONE

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Subject testing

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From HERRONBUSINESS

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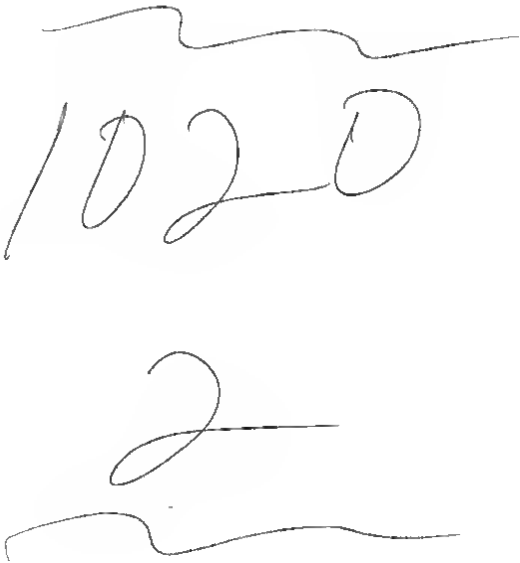
Fax Number 18888771655

1 Pages in Fax

testing

( )Urgent ( )For Review ( )Please Comment ( )Please Reply ( )Please Recycle



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63

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- ☐ Replying to a Message
- ☐ Forwarding a Message
- ☐ Attaching a File to a Message
- ☐ Including a Link in a Message

Wednesday, April [illegible], 2013

Reservation Confirmation
[illegible]
Confirmation # [illegible]

Dear [illegible],

We have received the above reservation. At this property we are unable to guarantee that the room is Connecting, Adjoining, or Specific. If you have any questions regarding the reservation, please contact our reservations support team at [illegible] or [illegible].

Thank You
[illegible]

Arrival Info			
Arrival Date	[illegible]	Nights	[illegible]
Adults	[illegible]	Children	[illegible]
Rate	[illegible]	Rate Type	[illegible]
Cancellation	[illegible]	Departure Date	[illegible]

Guarantee Information			
Card Used	Visa	Expiration	[illegible]
Card Number	[illegible]	Card Holder	[illegible]

Booking Details			
Number of Rooms	[illegible]	Number of Nights	[illegible]
Check-In Date	[illegible]	Check-Out Date	[illegible]

Room Type	Rate	Number of Rooms	Total
[illegible]	[illegible]	[illegible]	[illegible]

Room Total	Rate	Amount
	[illegible]	[illegible]
	Total	[illegible]

Sub-Total: [illegible]
Tax ([illegible]%): [illegible] = [illegible]

Taxes are subject to change. Please confirm at check-in.

Cancellation Policy
[illegible]

[illegible]

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Thanks

FAX FOR

Test

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CA
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Figure 8 shows how the Unisphere GUI can provide additional details about LUN mappings for each virtual machine

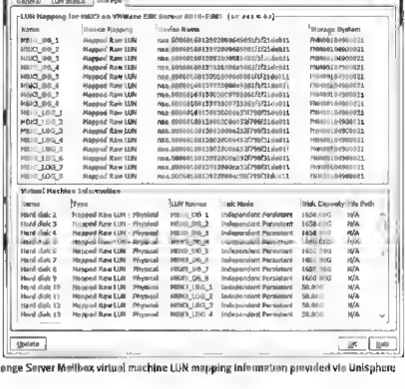

Figure 8. Exchange Server Mailbox virtual machine LUN mapping information provided via Unisphere